February 9, 2020

SSI Youth Community-Based Services and Supports

Final Report

Contract # 28321319Q00000365
About This Deliverable

Under a quick turnaround call order, SSA asked Abt Associates to synthesize available evidence on the effect of community-based services and supports for transition-age youth with disabilities, and to make recommendations on the role of community-based services in SSA’s SSI work incentives for transition-age youth. This deliverable is the project’s final report.

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<th>Description</th>
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<tr>
<td>ADHD</td>
<td>Attention Deficit/Hyperactivity Disorder</td>
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<tr>
<td>AJC</td>
<td>American Job Centers</td>
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<tr>
<td>ASPIRE</td>
<td>Achieving Success by Promoting Readiness for Education and Employment</td>
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<tr>
<td>CDR</td>
<td>Continuing Disability Review</td>
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<tr>
<td>CFR</td>
<td>Code of Federal Regulations</td>
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<tr>
<td>CIL</td>
<td>Center for Independent Living</td>
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<tr>
<td>CTP</td>
<td>Comprehensive Transition and Postsecondary program</td>
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<td>DOL</td>
<td>Department of Labor</td>
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<td>DDR</td>
<td>Disability Determination Services</td>
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<td>ERIC</td>
<td>Education Resources Information Center</td>
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<td>Department of Health and Human Services</td>
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<td>IDEA</td>
<td>Individuals with Disabilities Education Act</td>
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<tr>
<td>IEP</td>
<td>Individualized Education Plan</td>
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<td>IPE</td>
<td>Individualized Plan for Employment</td>
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<td>IPS</td>
<td>Individual Placement and Support</td>
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<td>IRWE</td>
<td>Impairment Related Work Expenses</td>
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<td>IWP</td>
<td>Individual Work Plan</td>
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<td>ODO</td>
<td>Social Security’s Office of Disability Operations</td>
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<td>PASS</td>
<td>Plan to Achieve Self-Support</td>
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<tr>
<td>POMS</td>
<td>Program Operations Manual System</td>
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<tr>
<td>PROMISE</td>
<td>Promoting the Readiness of Minors in Supplemental Security Income</td>
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<td>RAISE</td>
<td>Recovery after an Initial Schizophrenia Episode Connection program</td>
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<td>RCT</td>
<td>Randomized Control Trial</td>
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<td>RSA</td>
<td>Rehabilitation Services Administration</td>
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<tr>
<td>SEIE</td>
<td>Student Earned Income Exclusion</td>
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<tr>
<td>SGA</td>
<td>Substantial Gainful Activity</td>
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<tr>
<td>SSA</td>
<td>Social Security Administration</td>
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<td>WIOA</td>
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<td>WIPA</td>
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1. Introduction and Background

Under a quick turnaround call order, the Social Security Administration (SSA) asked Abt Associates and our partners at the Institute of Community Integration at the University of Minnesota and the Rehabilitation Research and Training Center at Virginia Commonwealth University to produce a report about community-based services and supports available for youth ages 14 to 25 with disabilities. In this age range, youth transition from being legal dependents to legal adults. For youth with disabilities, this transition can be daunting because of the loss of federally guaranteed education and supports through the public school system and challenges in obtaining and maintaining employment.

For youth with disabilities who receive public benefits, transition to adulthood also includes potential changes in benefits eligibility. The Supplemental Security Income (SSI) program provides monthly, means-test-based cash payments to children and adults with severe mental and physical health impairments. The eligibility rules for children (those under age 18) differ from those for adults. For children, eligibility hinges on whether the impairment results in “marked and severe functional limitations”—i.e., impairment that affects functioning (as indicated in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996). For adults, eligibility hinges on whether the impairment affects ability to work.

When youth SSI recipients reach age 18, SSA redetermines their eligibility for SSI benefits using the adult requirements for SSI eligibility. The age-18 redetermination includes a decision about whether the individual can perform substantial gainful activity (SGA).\(^1\) In 2018, SSA conducted 81,662 age-18 redeterminations. Among these, 53 percent have thus far resulted benefits continuation, 33 percent resulted in disability cessation decisions and benefits termination with no appeal pending, and 13 percent were pending an appeal decision as of February 2019 (SSA, 2019). Looking back to 2015, which has very few pending appeal decisions at the time of reporting, 52 percent of age-18 redeterminations ultimately resulted in continuation, and 48 percent resulted in disability cessation decisions and benefits termination (SSA, 2019).

Section 301 of the Social Security Amendments of 1980 (Public Law 96-265) allows for continuation of disability benefits for certain youth whose eligibility for SSI is terminated at the age-18 redetermination. Youth who begin participating in approved programs through special education, vocational rehabilitation (VR), or similar providers prior to the age-18 redetermination can continue receiving disability benefits until the end of their participation in that program. The purpose of Section 301 is to incentivize participation in programs that will help the youth to gain and maintain employment, with the hope that they will be able to support themselves financially as adults, without dependence on federal benefits. Many federal, state, local, and community-based programs offer services and supports to youth with disabilities who are transitioning to adulthood, but many of these programs are not specifically approved under Section 301.

This report describes the current community-based service and support landscape for youth with disabilities. The report also synthesizes the available evidence regarding the impact of community-based

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\(^1\) In 2020, for nonblind SSI recipients, performing SGA corresponds to earning more than $1,260 per month. For blind SSI recipients, the SGA earnings threshold was $2,110 per month in 2020.
services and supports on employment for youth with disabilities. The report answers the following research questions:

- What kinds of community-based supports and services are effective in improving employment, employment readiness, and related outcomes for youth with disabilities?
- Based on the available evidence, what policy changes to Section 301 could improve employment and related outcomes for transition-age youth receiving SSI?

The complex and dynamic web of private and public services available to youth with disabilities and their families can be complicated to navigate (National Academies of Science, Engineering, and Medicine, 2018). Many of these services, however, share common service and support components (Honeycutt & Livermore, 2018). Therefore, this report presents evidence by type of service and support component, rather than focusing on specific programs. The focus on type of service and support component can aid in SSA’s consideration of both current and future programs. The report is organized by three groups of service and support components: (1) work-based experiences, (2) career or vocational counseling, and (3) postsecondary education (Chapters 4, 5, and 6, respectively). These service and support components are often offered simultaneously; this report categorizes “blended” programs by their primary service component. Based on SSA instructions, this evidence review excludes evidence on programs that solely offer physical health, mental health, and dental services.

This report aims to catalogue evidence of the impact of different types of transition services on the likelihood that participants will obtain competitive, integrated employment. Competitive, integrated employment is defined within the Workforce Innovation and Opportunity Act of 2014 (WIOA) as full-time or part-time work at minimum wage or higher, with wages and benefits similar to those of people without disabilities performing the same work, and fully integrated with coworkers without disabilities.² Within this aim, however, it is important to recognize that the body of evidence on the effectiveness of community-based services and supports is somewhat limited. Furthermore, of that limited body of evidence, only some studies provide estimated effects of the community-based service on employment. Of the studies that report effects on employment, there is great variation in the definition of “employment” and often not sufficient information in each study to judge whether the reported employment outcome meets the definition of competitive, integrated employment as defined by WIOA. Thus, this text presents evidence of effective on “employment,” and there is ambiguity about the effective of a program on competitive, integrated employment.

² The reason this report studies the evidence on competitive, integrated employment as defined by WIOA instead of substantial gainful employment (SGA) as defined by SSA is that few studies report employment outcomes defined by achieving SGA or not. A small number of studies report impact on average earnings, but average earnings levels are not sufficient to determine the impact on the proportion who perform SGA.
After synthesizing the available evidence, the report provides recommendations for policy changes regarding the inclusion of specific community-based programs or service components in SSA’s Section 301 guidelines and related policies.

The remainder of the report is organized as follows: Chapter 2 describes the background and context of community-based transition services for youth. Chapter 3 discusses the methods used in the evidence review. Chapters 4 through 6 review the evidence we found, and Chapter 7 summarizes the resulting conclusions and recommendations.

- Chapter 2: Youth on SSI: Background and Context of Community-Based Services
- Chapter 3: Methods
- Chapter 4: Work-Based Experiences and Services
- Chapter 5: Counseling and Self-Determination
- Chapter 6: Postsecondary Programs
- Chapter 7: Conclusions and Recommendations
2. Youth on SSI: Background and Context of Community-Based Services

This chapter describes SSA policy regarding transition-age youth receiving SSI and federal legislation regarding the provision of transition services for youth with disabilities. The chapter begins with a description of the SSI program for youth and the age-18 redetermination process. Next, the chapter describes current Section 301 policy. The chapter also discusses federal support for transition services. Numerous federal programs offer employment supports, education and training, and other services for youth with disabilities, with the intention to help these youth achieve economic self-sufficiency and avoid poverty and long-term reliance on public benefits. Understanding the landscape of these federal programs provides insight into how community-based services arise and are funded.

2.1 The SSI Program for Youth and the Age-18 Redetermination Process

The Supplemental Security Income (SSI) program was established in 1972 under Title XVI of the Social Security Act and is administered through the Social Security Administration (SSA). SSI provides monthly, means-test-based cash payments to children and adults with severe mental and physical health impairments. In 2018, roughly 1.1 million children received SSI benefits (SSA, 2019). The vast majority of children who receive SSI (roughly 80 percent), have mental disorders including autism spectrum disorder, major affective disorder, and others (Hemmeter & Gilby, 2009). The eligibility rules differ for children (those under age 18) and adults. For children, eligibility hinges on whether the impairment results in with “marked and severe functional limitations”; i.e., impairments that affect functioning (as indicated in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193). For adults, eligibility hinges on whether the impairment affects ability to work.

For SSI youth to continue SSI eligibility under adult criteria past age 18, SSA makes a redetermination based on the youth’s ability to perform substantial gainful activity (SGA), as required by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. Additionally, under the adult rules, income of the youth’s parents counts differently towards the youth’s household income. After the age-18 redetermination (for redeterminations conducted in 2015), approximately 48 percent of youth were determined to not meet adult SSI criteria and were therefore no long eligible for SSI benefits (SSA, 2019, Table V.D.4).

The age-18 redetermination usually occurs during the 12 months after the recipient’s 18th birthday (though this is not required by regulation). The process of conducting the age-18 redetermination includes gathering extensive information about the young adult (e.g., medical status, school records and information, vocational rehabilitation services received, and other information documenting the young adult’s ability to function and work) in order to determine eligibility under the adult criteria for SSI. The burden of proof lies with the recipient in establishing that adult disability criteria for SSI are met. Consequently, it is critical that the young adult, family, school personnel, and community-based service agencies document and provide accurate evidence related to the disabling condition and the ability of the young person to function and work.

For the redetermination, SSA field office staff collect the information from the youth and submit it to the state Disability Determination Services agency, which makes the redetermination decision. After the decision is rendered, the individual has 60 days to appeal. There are several possible levels of appeal, including reconsideration by the state Disability Determination Service agency, review by an Administrative Law Judge, review by an Appeals Council, and review by the federal court system. Youth
who demonstrate serious work effort at age 17 (defined as earnings roughly equivalent to 34 hours per week at the 2005 federal minimum wage) are roughly 70 percent more likely to be determined ineligible for continued SSI benefits under adult criteria (Hemmeter & Gilby, 2009).

SSA has several policies and programs to support youth SSI recipients who want to work. SSA’s primary approach for encouraging employment for transition-age youth (ages 14-17) with disabilities who receive SSI is work incentives that allow them to keep at least some of their SSI benefits and Medicaid coverage while they work. The work incentive targeted specifically to younger SSI recipients is the Student Earned Income Exclusion (SEIE), which allows income, up to a maximum, to be excluded from benefits calculation if a recipient is a student under age 22.3

SSA also supports youth SSI recipients who want to work by offering Work Incentive Planning and Assistance (WIPA) to youth (and adults) starting at age 14. The goal of WIPA for SSI youth recipients is to offer accurate information that youth can use to make a successful transition to employment. The WIPA program is administered under the authority of the SSA through the Ticket to Work and Work Incentives Improvement Act (1999). The purpose of the WIPA program is to ensure that SSA beneficiaries receive accurate information about work and benefits. WIPA providers employ Community Work Incentives Coordinators who can provide benefits counseling, conduct outreach, and facilitate information sharing across state, federal, and local community-based organizations. Currently, 82 WIPA providers serve U.S. states, territories, and the District of Columbia.

SSA also sponsors the Ticket to Work and Protection and Advocacy for Beneficiaries of Social Security programs. The latter program serves SSI and Social Security Disability Insurance (SSDI) recipients age 14 and older by providing legal support, advocacy, and information on how to address impairment-related employment concerns, access to transportation, access to housing assistance, and access to job supports through community agencies. These agencies include Employment Networks that provide services under the Ticket to Work program. Ticket to Work is a free and voluntary program for SSI and SSDI recipients age 18 and older providing career counseling, vocational rehabilitation, and job placement and training.

Finally, SSA seeks to encourage the development of job readiness skills and work attempts under what is known as Section 301 (Section 301 of the Social Security Disability Amendments of 1980, which establish these rules), as described in DI 14505.010 of SSA’s Program Operations Manual System (POMS). Section 301 allows SSI benefits to continue after age-18 disability cessation decisions if a recipient is participating in approved programs that SSA determines is likely to lead to SGA. As such, payments allowed by Section 301 (i.e., those benefit payments allowed because of participation in Section 301-approved programs) can provide an important income bridge for youth SSI recipients as they transition into adulthood.

### 2.2 Section 301

Section 301 of the Social Security Amendments of 1980 (Public Law 96-265) allows SSA to provide cash disability payments and medical insurance (Medicare and/or Medicaid) even after a cessation determination if, at the time of the determination, individuals are participating in programs that may enable them to become self-supporting. Youth who begin participating in approved programs through special education, vocational rehabilitation (VR), or similar providers prior to the age-18 redetermination

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3 For 2020, the maximum amount of the income exclusion applicable to a student is $1,900 per month but not more than $7,670 in the calendar year.
can continue receiving disability benefits until the end of their participation in that program. Continued support under Section 301 is intended to support beneficiaries to gain the skills and experiences they need to be able to be employed and self-supporting in the future. The determination for Section 301 eligibility requires multiple steps. Virginia Commonwealth University’s National Training and Data Center: Understanding Section 301 (2018) manual describes the Section 301 determination process. Beneficiaries initiate an application for Section 301 after they are determined not to meet adult disability criteria during the age-18 redetermination. It is unclear to the authors of this report whether the personalized cessation notice also includes formal communications from SSA regarding possible Section 301 eligibility. As such, many transition-age youth who receive SSI and their families are unaware of the possible continuation of SSI benefits under Section 301 after a cessation determination. To be eligible for Section 301 payments, the individual must have started participating in a Section 301-approved program at least one month before the date on which the individual was determined to no longer meet disability criteria.

Social Security’s Office of Disability Operations (ODO) reviews whether an individual’s participation in a specific program will increase the likelihood that the individual will become self-supporting. A beneficiary must meet specific requirements for Section 301 payments to apply, and there are two distinct processes to evaluate a Section 301 application: one for students ages 18 through 21 and another for young adults participating in non-school, Section 301-approved programs. Exhibit 2-1 provides the text of the Section 301 policy that defines an appropriate program for Section 301 approval (POMS DI 14505.010).

Exhibit 2-1. Current SSA Policy for Definition of an Appropriate Program for Section 301

An appropriate program of VR services, employment services, or other support services is one of the following:

1. An individualized education plan (IEP) developed under policies and procedures approved by the Secretary of Education for assistance to states for the education of individuals with disabilities under the Individuals with Disabilities Education Act (IDEA), as amended. An individual must be age 18 through age 21 for this provision to apply.

2. A program carried out under an individual work plan (IWP) with an employment network under the Ticket to Work and Self-Sufficiency Program as described in DI 55020.001B.

3. A program carried out under an individualized plan for employment (IPE) with a state VR agency (i.e., a state agency administering or supervising the administration of a state plan approved under title I of the Rehabilitation Act of 1973, as amended) as described in DI 55020.001D.

4. A program carried out under an IPE with an organization administering a Vocational Rehabilitation Services Project for American Indians with Disabilities authorized under section 121 of part C of title I of the Rehabilitation Act of 1973, as amended.

5. As of March 1, 2006, a Plan to Achieve Self-Support (PASS). (A PASS qualifies because it is a program of employment or other support services carried out with an agency of the federal government (SSA), under an individualized written employment plan similar to an Individualized Plan for Employment (IPE) used by state VR agencies.)

6. A program of VR services, employment services, or other support services carried out under a similar, individualized written employment plan with one of the following:
   a. An agency of the federal government (e.g., SSA or the Department of Veterans Affairs), including a provider under an SSA demonstration project; such as PROMISE (Promoting the Readiness of Minors in Supplemental Security Income);

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4 The Virginia Commonwealth University’s guidebook titled “Understanding Section 301” for the WIPA National Training and Data Center states that the cessation notice does not include information about Section 301. Responses to public comments about transition-age youth SSI recipients make it appear that some families remain unaware of Section 301 at the time of cessation (Appendix B).
2. YOUTH ON SSI: BACKGROUND AND CONTEXT OF COMMUNITY-BASED SERVICES

b. A one-stop delivery system or specialized one-stop center described in section 134(c) of the Workforce Investment Act of 1998; or
c. Another provider of services approved by SSA; providers we may approve include, but are not limited to:
   • A public or private organization with expertise in the delivery or coordination of VR services, employment services, or other support services; or
   • A public, private, or parochial school that provides or coordinates a program of VR services, employment services, or other support services carried out under an individualized program or plan, including a written service plan established under Section 504 of the Rehabilitation Act of 1973.

For students ages 18 through 21 who are receiving services through an individualized education plan (IEP), ODO assumes that continuation in or completion of the program will increase the likelihood that the individual will become self-supporting. Thus, SSI youth who do not meet the adult disability definition, but who meet the income and resource requirements and who have been participating in an IEP for at least one month prior to redetermination are eligible for continued SSI benefits under Section 301. SSA maintains that completing an IEP leads to positive outcomes and an increased likelihood of self-sufficiency.

For recipients of SSI who are older than age 21 or are participating in other services, ODO personnel examine four factors to determine whether the program will increase the likelihood that the individual will obtain and maintain competitive employment at a level that will allow them to be self-supporting.

1. **The skills and abilities that the individual will acquire through participation in the program will increase likelihood of doing work at the substantial gainful activity level.** The individual must be expected to participate in the program long enough to learn targeted skills that will set the foundation for participation in work in which the physical and mental demands of the work are within the individual’s capabilities when considering his or her disabilities.

2. **The program includes formal schooling or other training that will increase likelihood of adjusting to other work.** This could include, for example, a program that increases reasoning ability, communication skills, or arithmetic. The education or training should provide for direct entry into skilled or semi-skilled work that exists in the national economy at the SGA level. As in the first criterion, the physical and mental demands of the work should be such that the individual would still be able to meet those demands despite a reduction in residual functional capacity (i.e., they will be able to meet the demands of the work given their disabilities).

3. **The skilled or semi-skilled work experience that the beneficiary receives will increase likelihood of adjusting to other work.** This includes an examination of whether the participant’s work goal is an unskilled, semi-skilled, or skilled occupation, with particular attention to whether the participant can use learned skills (if applicable) in other types of work (beyond the work in which the individual gains work experience).

4. **Determining whether work exists in the national economy.** The last factor considered is whether the type of work for which a participant is preparing is considered to exist in the national economy. This involves an examination of the likelihood that there will be open positions that the beneficiary would be qualified for upon completion of the program, service, education, or training. Isolated jobs that exist only in very limited numbers in relatively few locations outside of the region where the individual lives are not considered work that exists in the national economy.
Examining all four factors, ODO will make a judgement as to whether the program improves the likelihood that in the future SSA would find that the individual is able to do past relevant work (combination of 1 and 4) OR whether the program improves the likelihood that in the future SSA would find that the individual is able to adjust to other work that exists in the national economy (factor 2 or 3, combined with 4).

SSA terminates Section 301 payments when the individual graduates or ceases participating in the qualifying program (with the exception of a temporary interruption in participation—defined as lasting no more than three months), or when SSA determines that participation is no longer likely to increase the likelihood of future competitive employment and economic self-sufficiency. Individuals may appeal ODO’s initial Section 301 determination and may appeal the termination of Section 301 payments.

2.3 Federal Support of Transition Services for Youth with Disabilities

Youth with disabilities access services to support the transition to adulthood through many different community-based programs. For purposes of this report, we define community-based programs as programs that serve U.S. youth ages 14 to 25 with disabilities, are accessible to eligible youth in a local geographic area, and provide at least one type of service hypothesized to advance employment readiness or provide training and work-based experiences. We exclude services that solely offer physical health, mental health, and dental services. Some of the evidence we review pertains to services offered by demonstration projects (e.g., PROMISE and the Youth Transition Demonstration) that have ended and so are not currently accessible.

Through several pieces of federal legislation, various federal agencies including the Department of Labor (DOL), Department of Health and Human Services (HHS), Department of Education, and SSA fund and provide some oversight of many community-based service organizations that implement federal legislation and policy. Understanding this landscape is important context for considering potential additions to Section 301. Though sharing common federal mandates, community-based programs vary widely from state to state, and community to community. Thus, SSI recipients can experience inconsistent access to these programs based upon location, which may influence outcomes for youth and young adults with disabilities. This is an important consideration when reviewing evidence of specific programs because the findings from one site may not be generalizable to a larger geography or across variations in implementation.

2.3.1 Department of Education

The Department of Education administers several programs for youth with disabilities, including transition-age youth. It funds and regulates special education programs in primary, secondary, and postsecondary schools as authorized by several pieces of legislation described below. This report considers all formal schooling as a community-based service or support. Participation in the secondary school programs for youth with disabilities is reason for continuation of SSI benefits under Section 301; but participation in postsecondary schools does not necessarily make an SSI youth eligible for continued benefits under Section 301.

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5 The appeals process for Section 301 determination follows the same appeals process as for other Social Security determinations, described briefly for the age-18 re-determination process in Section 2.1 of this chapter.
The Department of Education also funds parent information centers, which educate parents of children with disabilities about disability rights and available services and supports. We do not describe Parent Information Centers in this report, as they do not directly serve youth. Vocational rehabilitation is overseen by the Rehabilitation Services Administration (RSA) under the Department of Education. Given the complexities of VR and its foundational legislation, we describe it separately in the next section (Section 2.3.2).

**Foundational Federal Legislation**

The following pieces of legislation authorize the Department of Education’s administration of programs for youth with disabilities.

**Individuals with Disabilities Education Act of 2004 (IDEA):** With regard to transition planning and services, IDEA requires that no later than the first IEP in effect when the student turns 16 (or younger, if determined appropriate by the IEP team), the IEP must include: (1) appropriate, measurable postsecondary goals based upon age-appropriate assessments related to training, education, employment, and, where appropriate, independent living skills; and (2) the transition services (including courses of study) needed to assist the child in reaching these goals. In addition, the public agency must invite the student with a disability (and parent) to attend the IEP meeting if the purpose of the meeting will be the consideration of postsecondary goals for the student and the transition services needed to assist the student in reaching these goals, as required by IDEA (34 CFR §300.321(b); 20 U.S.C. §1414(d)(1)(B)). All IEP/transition planning must fully consider the student’s strengths, preferences, and interests (34 CFR §300.43 (a); 20 U.S.C. §1401(34)).

**Rehabilitation Act of 1973:** Commonly known as the Rehab Act, this legislation has multiple ramifications for programs that the Department of Education supports. We will discuss implications for VR services. Of particular relevance for this discussion, however, is Section 504, which allows for accommodations and supports for any student with any impairment that interferes with their ability to learn in a general education classroom. These 504 plans do not provide special education services; rather, they delineate required modifications that will allow students to learn within general education.

**Higher Education Opportunity Act of 2008:** Congressional interest in strengthening colleges and universities and in providing financial assistance for students in postsecondary and higher education was originally included in the Higher Education Opportunity Act of 1965. The most recent reauthorization included several significant disability policy provisions, including: (a) a commission and model programs to increase access to instructional materials; (b) model programs for students with intellectual disabilities, including provisions for national technical assistance to support state and local programs; (c) access to federal financial aid for students with intellectual disabilities and veterans with disabilities; and (d) programs to train teachers and other personnel to teach students with disabilities. Demonstration projects conducted to date have documented the importance of college participation in supporting young adults with intellectual disabilities in achieving meaningful employment outcomes following graduation (Grigal, et al., 2018).

**Strengthening Career and Technical Education for the 21st Century Act of 2018 (Perkins V):** The Carl D. Perkins Vocational and Technical Education Act was first authorized by the federal government in 1984 and re-authorized in 1998 and 2006. The Perkins Act, from its origin in
1984, has required states to ensure that special education students have equal access to career and technical education and that localities ensure the full participation of these students in programs that are approved using Perkins funds. One of the purposes of Perkins V is to develop working-age youths’ academic knowledge and technical skills through employment opportunities. Perkins V specifically targets youth with disabilities; individuals from economically disadvantaged families; youth who are in, or have aged out of, the foster care system; and homeless individuals. Perkins V also places an increased emphasis on work-based learning. This provision emphasizes greater opportunities to work with professionals in experiential learning opportunities, including on-the-job training, apprenticeships, job shadowing, internships, and other strategies.

Programs and Services Available to Transition-Age Youth

The legislation described above authorizes the Department of Education to fund and regulate individualized education programs (IEPs), Section 504 plans, and postsecondary education programs for youth with disabilities. These programs are described briefly, below.

Individualized Education Programs (IEPs): Many students with disabilities have IEPs, which are documents that set forth a plan of services, supports, and goals that will allow students to meet their educational needs given their disabilities (guided by IDEA). As noted above, for transition-age youth (ages 16-21 in the school system), these documents include plans for how to support youth so that they can transition to adulthood successfully. Youth who have an IEP may receive transition services in the school system after completing high school until age 21. Currently, youth in special education transition services are automatically eligible for continued receipt of SSI benefits through Section 301.

Transition planning through IEPs seems to be an important element of supporting students’ successful transition to adulthood. In a nationally representative study of 200 special education students with traumatic brain injury who exited high school in 2002/2003 (the second National Longitudinal Transition Study), Wehman & Chen, et al. (2014) found that when transition planning for adult life was done for a student, the student was 17 times more likely to have ever been employed eight years after exiting high school, compared to students for whom no transition plan was made. They were also seven times more likely to be currently employed. An important distinction is that the transition planning was done for the student; the same study finds that instruction (alone) on how to plan for transition did not influence employment in the eight years after exiting high school.

Section 504 plans: Youth with disabilities who do not receive services through an IEP may have a 504 plan in place (allowed for by Section 504 of the Rehabilitation Act of 1973). As stated above, these plans provide for accommodations and supports that allow the student to participate in general education. While 504 plans do not allow for transition services through special education until the student turns 21, SSI recipients may continue to engage in general education beyond their 18th birthday. It is possible that 504 plans could be included in Section 301 similarly to the current inclusion of IEPs; however, there is limited

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6 While a student ages 18 through 21 with an IEP currently qualifies for Section 301 benefits, it is essential to note that not all students with disabilities are on an IEP, nor do all students with disabilities receive school-based transition services beyond age 18. For example, during implementation of the Wisconsin PROMISE (Promoting the Readiness of Minors in Supplemental Security Income) demonstration the project discovered that 16 percent of youth participants (all of whom received SSI benefits) did not have an IEP; moreover, only 65 percent of PROMISE youth attended school at least 90 percent of the time (Anderson et al., 2019).
information regarding outcomes for youth with disabilities who participate in general education with the support of a 504 plan.

**Transition Programs for Students with Intellectual Disabilities (TPSID):** The Higher Education Opportunity Act of 2008 includes provisions to increase access and opportunities for youth and adults with intellectual disabilities who are interested in participating in higher education programs. The Department of Education’s Office of Postsecondary Education funds 25 five-year TPSID model demonstration projects ending in September 2020 through a competitive grant-making process. TPSID projects serve students with intellectual disabilities through academically inclusive college courses and extracurricular activities; internships and competitive integrated employment experiences; and on-the-job training, independent living, socialization, and self-advocacy skills. Students who complete the program earn meaningful credentials. This office also funds a national coordinating center administered by Think College, a project team at the Institute for Community Inclusion at the University of Massachusetts Boston.

**2.3.2 Vocational Rehabilitation Services and Programming: Foundational Federal Legislation**

Vocational rehabilitation (VR) is overseen by the Rehabilitation Services Administration (RSA) under the Department of Education. The complexities of this service system warrant an examination of foundational legislation and program and service provision separate from other programs through the Department of Education. VR serves both youth and adults with disabilities. It is offered in community-based settings and is one of the services approved under Section 301.

**Foundational Federal Legislation**

Two pieces of federal legislation shape the VR program, authorizing the Department of Education to create the RSA to provide vocational supports to individuals with disabilities.

**Rehabilitation Act of 1973:** This legislation provides for comprehensive services to all individuals with disabilities, regardless of the severity of the disability; it also outlaws discrimination against citizens with disabilities. The Act also focuses on youth and adults transitioning into employment settings and ensures the development and implementation of a comprehensive and coordinated program of vocational assistance for individuals with disabilities, thereby supporting independent living and maximizing employability and inclusion within communities. This Act underlies the provision of services offered as a part of VR, and it includes guidance on how these services are to be delivered.

**Workforce Innovation and Opportunity Act (WIOA):** Passed by Congress in 2014, WIOA amends and replaces the Workforce Investment Act of 1998. It specifies requirements intended to improve the coordination of services among various federal programs; reduce overlaps in workforce service programs; encourage certain occupational pathways; and shift the emphasis of services from sheltered employment to competitive, integrated employment for youth and adults with disabilities. Several aspects of WIOA are specifically directed toward state vocational rehabilitation agency programs. Title IV of WIOA directly requires vocational rehabilitation agencies to make two major changes (34 CFR §361.4(a)(2)). VR agencies must provide free employment transition services for high school and postsecondary education students with disabilities and use 15 percent of their federal funding on these services. The required activities of pre-employment transition services include job exploration counseling; work-based learning experiences, which may include in-school, after-school, or community-based opportunities; counseling and opportunities for enrollment in comprehensive transition or postsecondary
education programs at institutes of higher education; workplace readiness training to develop social skills and independent living; and instruction in self-advocacy, including peer mentoring.

Programs and Services Available to Transition-Age Youth

State VR Agencies: All 50 states and 5 U.S. territories have state VR agencies that provide a variety of free services to qualifying persons age 14 and over with disabilities. Services may include assessments to determine a client’s interests, skills, and services and supports they require; the development of an individualized plan for employment that outlines a client’s goals and services they will seek to achieve those goals; assistance in coordinating required services; job placement; and postemployment services to help the client maintain employment. Generally, VR is a time-limited service, with service ending after the client maintains employment for 90 days in a job agreed upon by the client and the VR counselor. There are many locations in each state; for example, Maine has nine offices; Alaska has 10; Texas has scores (Maine Bureau of Rehabilitation, 2013; Alaska Department of Vocational Rehabilitation, 2011; Texas Workforce Solutions, 2019).

Pre-Employment Transition Services: Pre-employment transition services are intended for both in-school youth and out-of-school youth and include job exploration, work-based learning, workplace readiness training, instruction in self-advocacy, and counseling to facilitate enrollment in postsecondary education. Students who participate in these services through their IEP would be eligible for SSI benefits continuation under Section 301, but out-of-school youth served by the program would not be. WIOA requires the local VR agency or workforce agency to coordinate with the local education authority to identify eligible youth, host and attend meetings regard the youth’s school transition, and provide services to students without a VR eligibility determination. Agencies implementing pre-employment transition services may also work with local workforce development boards, one-stop centers, and employers to determine job opportunities for transition-age youth with disabilities (Workforce Innovation Technical Center, 2018).

2.3.3 Medicaid Waivers

The Social Security Act, Section 1915(c) was amended in 1983 to include the provision of Home- and Community-Based Services (HCBS) as part of Medicaid. This legislation authorized the creation of Medicaid HCBS waiver programs to support eligible individuals with disabilities to receive services in their home and or community, as opposed to services provided in institutional settings. States can choose to operate HCBS waivers, and there are variety of HCBS waiver programs across the United States. In 2014, the Home- and Community-Based Final Rule was issued, which, among other guidance, allows waivered services (including services that support transition and employment) to be delivered in home and community settings, rather than in segregated or institutionalized settings.

State HCBS waiver programs can provide a combination of standard medical services and nonmedical services, which can in some cases include supports for eligible transition-age youth with disabilities. Recipients and families choose which services and supports an individual receives through HCBS waivers. These services and supports are offered through a variety of community provider organizations; as such, availability of services and supports provided through HCBS waivers varies significantly based upon the geographic location in which a recipient lives. Examples of employment-focused community-based services for eligible youth that may be provided through HCBS waivers include:

- Work-based learning
- Career counseling
• Postsecondary education and training
• Job coaching
• Benefits counseling
• Financial literacy
• Self-determination skills training
• Career exploration
• Transportation training

Participation in the programs that accept HCBS waivers does not automatically qualify transition-age youth for SSI benefits continuation under Section 301, but these programs may have core services that mimic those of programs already approved under Section 301.

2.3.4 Department of Health and Human Services (HHS)
HHS provides funding and guidelines for the operation of programs intended to foster independent living for persons with impairments and for older Americans. The authorizing legislation results in HHS funding many community-based services and supports aimed at helping persons with impairments to live independently and find access to transportation. With living and transportation challenges solved, individuals may be more ready to seek and maintain employment. HHS also provides funding for a small number of supported employment programs. Participation in the programs described below does not automatically qualify transition-age youth for SSI benefits continuation under Section 301.

Foundational Federal Legislation
In 2012, the Department of Health and Human Services created the Administration for Community Living to help persons with disabilities and older adults live at home with supports they need and participate in their communities. The Administration for Community Living administers programs authorized by a variety of statutes. Notably, the Administration for Community Living administers programs authorized by the Developmental Disabilities Act of 2000, along with WIOA and the Older Americans Act of 1965 (most recently updated in 2016). The Developmental Disabilities Act aims to “assure that individuals with developmental disabilities and their families participate in the design of and have access to needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, and integration and inclusion in all facets of community life.” The Administration for Community Living also operates programs and funding streams authorized by at least 12 other statutes.

Programs and Services Available to Transition-Age Youth
Centers for Independent Living. Most notably for transition-age youth, the Administration for Community Living funds Centers for Independent Living (CILs) through discretionary grants. Every state and U.S. territory has a State Plan for Independent Living specifying a three-year plan for providing and improving independent living. The number of CILs varies widely by state. For example, Hawaii has two, Missouri has four, and California has 27. CILs provide advocacy services, information and referral, independent skills training, person counseling, and peer mentorship.

• Individual-level advocacy services involve formal and informal training to help people with disabilities become assertive self-advocates and promote personal empowerment.
• Systems-level advocacy services include partnering with community stakeholders to ensure compliance with disability legislation (e.g., the Americans with Disabilities Act) and to effect positive attitudinal and environmental change in the community.

• Information and referral services aim to connect individuals with disabilities with services offered outside the CIL, thereby connecting the individual to a larger web of services while promoting interagency communication and cooperation.

• Independent living skills include training on basic tasks that lead to functional independence, such as budgeting, résumé writing, employment assistance, and individualized supports.

• Finally, CILS provide peer mentorship as a valuable means of emotional support that gives individuals in CILs an opportunity to work with others to devise creative solutions for issues with everyday living (Administration for Community Living, 2017).

In addition, CILs may provide such direct services as physical therapy, psychological counseling, mobility training, transportation, and housing or employment assistance (Administration for Community Living, 2017). With the passage of WIOA, CILs have new statutory responsibilities for core services such as supporting youth transition to employment and postsecondary education.

**Supported Employment.** HHS’s Substance Abuse and Mental Health Services Administration (SAMHSA) provides grant funding to several local community services that offer supported employment programs for individuals with co-occurring mental and substance use disorders. SAMHSA’s Transforming Lives Through Supported Employment program, awarded five-year grants to seven states in 2014 to implement individual placement and supported employment, with each state planning to serve a total of 225 to 450 people. Although this program is small, the evidence review examines this supported employment model. The program was not specifically designed for youth, but transition-age youth are eligible. These sites received continuation and technical assistance grants in 2017 and 2018. In 2019, SAMHSA issued a call for proposals to fund seven new grants, each for five years.

### 2.3.5 Department of Labor (DOL)

DOL is authorized by several statutes to fund training programs and employment services. For example, in addition to the provision of VR services, WIOA also authorized the establishment of American Job Centers (AJCs) through DOL, previously called one-stop centers under the Workforce Investment Act of 1998. AJCs fit clearly in this report’s focus on community-based services, as their services are local and accessible to all working-age youth and adults. In addition to AJCs, DOL has funded Job Corps for more than 50 years, as authored by the Economic Opportunity Act of 1864, a large antipoverty initiative. Job Corps does not fit clearly in this report’s focus on community-based programs due to its rigorous eligibility criteria and the fact that it can be a residential program isolating youth from their community. However, we consider it for this report because it is a national program providing work-based experience specifically for disadvantaged youth and is available to SSI youth. These two programs are described in the balance of this section.

**Programs and Services Available to Transition-Age Youth**

**American Job Centers (AJCs):** Coordinated by DOL’s Employment and Training Administration, AJCs provide a variety of employment, training, and educational services in a one-stop model. Services through AJCs are intended to facilitate the full participation of American workers by providing supports that assist individuals to explore, seek, find, and advance employment. They can also refer eligible youth and adults to DOL-funded training and apprentice programs. There are an estimated 2,400 AJCs around the United
States. They are overseen by local Workforce Development Boards, which by law must be constituted by a majority of business leaders, with other representatives representing education, training, labor, and economic development. Throughout the country, there are approximately 45 Disability Resource Coordinators to help strengthen the capacity of AJCs to increase employment opportunities for people with disabilities.

**Job Corps:** Job Corps is a free, national technical training and education program for low-income, transition-age youth (ages 16-24). Persons with disability can apply beyond age 24 if they meet other eligibility requirements. Job Corps is available to transition-age youth with disabilities receiving SSI, if they are legally permitted to work in the United States, meet low-income requirements or are victims of human trafficking, have documented proof of difficulty getting a high school education or have difficulty keeping a job (due to homelessness, parenting responsibilities, other), have no behavior problems that would prevent them from completing the program, do not use drugs illegally, do not require court supervision or have certain criminal convictions, and express commitment to a desire to work. There are four career development phases in Job Corps programming: (1) Outreach and Admissions, (2) Career Preparation Period, (3) Career Development Period, and (4) Career Transition Readiness. There are more than 120 residential Job Corps programs nationwide (even on the DOL website, the numbers vary).  

### 2.3.6 National Demonstration Projects

In an attempt to build stronger evidence regarding the efficacy and effectiveness of programs and services, federal agencies have also funded national demonstration projects. Since 2005, SSA has funded two national demonstration projects focused on transition-age youth with disabilities receiving SSI benefits. These national demonstrations include a collaboration or investment of multiple federal agencies. They have been focused on the promotion of employment for SSI beneficiaries during their transition to adulthood, and before age 18 in particular. The national demonstrations typically implement new program service models through existing community-based service organizations. Participation in these demonstrations is an approved reason for SSI benefits continuation under Section 301.

**Youth Transition Demonstration (YTD):** The purpose of YTD was to assist youth with disabilities ages 14 to 25 to successfully transition from school to economic self-sufficiency. The beneficiaries who participated in this demonstration were youth who were receiving SSI or Social Security Disability Insurance (SSDI) payments based on their own disability as well as youth who were at risk of receiving SSI or SSDI benefits. The projects provided benefits counseling, career counseling, job development, job placement, and services to support continued employment. A key element of the initiative was the waiving of certain SSA disability program rules to provide enhanced financial incentives for youth with disabilities to initiate work or increase their work activity. SSA implemented six YTD projects across the country.

**Promoting Readiness of Minors in Supplemental Security Income (PROMISE):** Established in 2013, the goal of PROMISE was to improve the provision and coordination of services to promote education and employment outcomes resulting in long-term reductions in reliance on SSI. Six demonstration projects across 11 states received federal funding for a five-year award period. Beneficiaries who participated in this demonstration were youth ages 14 to 16 (at enrollment) who were receiving SSI.

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7 [https://www.jobcorps.gov](https://www.jobcorps.gov) states that there are 123; [https://www.dol.gov/general/topic/training/jobcorps](https://www.dol.gov/general/topic/training/jobcorps) states that there are 131.
Youth and family received five core services and supports: (1) case management, (2) benefits counseling, (3) financial education, (4) self-determination training, and (5) work-based experience.

The core aims of the PROMISE initiative were to: (1) establish strong and effective partnerships with agencies responsible for programs that play a key role in providing services to youth SSI recipients and their families; (2) develop a plan to coordinate services and supports and implement effective practices targeted to those needs of youth SSI recipients and their families; (3) increase the capacity of each PROMISE project to achieve and sustain results, based on the evidence-based practices; and (4) to rigorously test and evaluate the project. The federal PROMISE partners intend to use the findings and results of these projects to inform public policy and to build an evidence base for improving postsecondary education and employment outcomes for youth SSI recipients and their families.

Other Research. There are several ongoing research initiatives not listed above. DOL sponsors the Apprenticeship Inclusion Model initiative to research, develop, test, and evaluate innovative strategies in existing apprenticeship programs that provide skills training to people with disabilities. To do this, Social Policy Research Associates and its partners Wheelhouse Group and Jobs for the Future will work with four selected apprenticeship programs to enhance practices, innovate supports, and expand pathways for people with disabilities into high-demand, well-paying careers. Separately, HHS’s National Institute on Disability, Independent Living, and Rehabilitation Research funds and oversees Rehabilitation Research and Training Centers that conduct research to improve rehabilitation methodology and service delivery systems; improve health and functioning; and promote employment, independent living, family support, and economic and social self-sufficiency for individuals with disabilities.

2.4 Summary of Federal Supports for Transition-Age SSI Youth

Roughly half (48 percent) of SSI youth will lose their SSI benefits at the conclusion of the age-18 redetermination process because they do not meet SSI eligibility requirements for adults. The other half that maintain benefits (52 percent) include recipients who were issued a benefits continuation allowance under Section 301. Section 301 continuation payments are available to eligible SSI youth who participate in an approved program expected to improve the youth’s employment prospects. In addition to Section 301, SSA provides WIPA, Ticket to Work, VR, and Protection and Advocacy for Beneficiaries of Social Security services to help youth transition into employment associated with earnings at or above SGA.

In addition to services available from SSA, legislation authorizes the Department of Education, the Medicaid program, the Department of Health and Human Services, and the Department of Labor to fund community-based services and supports for youth with disabilities. Several of these services and supports are approved under Section 301: individualized education plans, VR, and federally funded transition service demonstrations (PROMISE, Youth Transition Demonstration). Participation in others does not automatically qualify SSI youth for benefits continuation under Section 301: postsecondary education, Section 504 plans, postemployment transition services for out-of-school youth, Centers for Independent Living, Transforming Lives Through Supported Employment, engagement with American Job Centers, and Job Corps. Not all of these services are available to all youth with disabilities, and implementation of the same program or service model can vary greatly across communities. However, many of these programs play an important role in connecting youth and young adults with disabilities to training; education; and, ultimately, employment.
3. Methods

This report provides recommendations about community-based services and supports that SSA might consider including in its work-incentives policies and practices to improve employment and related outcomes for transition-age youth and young adults with disabilities. The recommendations are based primarily on a synthesis of research on community-based employment supports, interventions, and programs. Section 3.1 describes the methodology for the evidence synthesis. Section 3.2 describes other data sources used to inform these recommendations.

3.1 Evidence Synthesis

This evidence synthesis characterizes research on effective school- and community-based services and supports to improve employment and related outcomes for transition-age youth and young adults. The team developed and tested a data collection guide and used this guide to consistently document findings from all reviewed articles. Reviewers receiving training in using the data collection guide and “tested” their understanding of the process by referencing two exemplar studies as models for their remaining reviews. Section 3.1.1 describes the search and inclusion criteria used to identify articles in the literature for review, and Section 3.1.2 describes the characteristics of each article that reviewers recorded. The References section lists all references in alphabetical order. Appendix A provides exhibits summarizing findings from all of the reviewed articles.

3.1.1 Search and Inclusion Criteria

The Abt team restricted the evidence synthesis to: (1) articles published from 2000 to present; (2) articles that empirically evaluate services, supports, and programs in the United States; and (3) articles that involved youth with disabilities ages 14 through 25. We also restricted our search to research articles that focused on employment and related outcomes with a specific interest in identifying and reviewing articles that included transition-age youth and young adults receiving SSI. We included journal articles and federally funded research and evaluation reports. The Abt team required that articles included in the review meet several criteria:

- Be published journal articles or federally funded evaluation reports
- Be written in English and conducted in the United States
- Report outcomes for transition-age youth (14-25 years old) with disabilities
- Offer empirical evidence (meta-analyses are included)
- Report employment or related outcomes
- Evaluate community-based interventions, programs, program components, services, or supports aimed at enhancing employment outcomes of youth with disabilities
- Include SSI recipients or people with disabilities who might be eligible for SSI

The team searched the following databases: PsycINFO, PubMed, Social Services Abstracts, Sociological Abstracts, and the Education Resources Information Center (ERIC). We chose these databases based upon their reputation for being comprehensive, well-managed databases that represent a broad spectrum of disciplines in which transition and employment programs might be discussed: special education, vocational rehabilitation, psychology, sociology, other social services, and medicine. In each database, the Abt team used the same set of search terms, listed in Exhibit 3-1.
3. METHODS

Exhibit 3-1. Search Terms and Source Libraries

<table>
<thead>
<tr>
<th>Search Terms</th>
<th>Databases/Source Libraries</th>
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</thead>
<tbody>
<tr>
<td>“transition-age youth” AND employment</td>
<td>PsycINFO</td>
</tr>
<tr>
<td>“emerging adults” AND employment</td>
<td>PubMed</td>
</tr>
<tr>
<td>youth AND SSI AND employment</td>
<td>Social Service Abstracts</td>
</tr>
<tr>
<td>“vocational rehabilitation” AND youth</td>
<td>Sociological Abstracts</td>
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<tr>
<td></td>
<td>ERIC</td>
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In addition, this evidence synthesis includes articles that SSA identified. The report lists these citations in the References section, and Appendix A catalogues them by program. In addition, the Abt team used the articles that SSA identified to conduct additional screening to ensure that all relevant articles were identified. First, the team reviewed the references of the SSA-provided articles for relevant literature. Then, we reviewed any articles that cited the SSA-provided articles for relevance (through a Google Scholar “cited by” search). The team reviewed 80 articles that provide empirical evidence of the effectiveness of a community-based intervention; identified another 166 articles from the search results that did not meet criteria for inclusion in this report; and considered 222 contextual studies, literature reviews, and systematic reviews for their relevance to this report.

3.1.2 Review Methods

The comprehensive data collection guide listed inclusion and exclusion criteria, operational definitions of key terms, definitions of intervention types (e.g., work-based experience) and subtypes (e.g., supported employment), and abstracting instructions. Reviewers recorded the following characteristics using the finalized data collection template.

**Identifying Information**
- Citation
- Funding agency or funding authority
- Whether participation in the program falls under current Section 301 guidelines for continued SSI payments after age 18

**Study Characteristics**
- Program name
- Data source if secondary data analyses were conducted
- Population: age, impairment type, whether SSI status was recorded, selection criteria, other population characteristics (e.g., special education recipients)
- Intervention type and subtype
- For each intervention tested:
  - Independent variable(s) including comparison groups (e.g., treatment versus control, high versus low dose, pre- versus postintervention)
  - Sample size(s)
  - Dependent variables/outcomes
    - Statistical type, value, and significance
3. METHODS

- If an employment variable, record whether employment was in an integrated setting, offered at least minimum wage, and involved 20 or more hours per week [if reported]
  - Covariates included
  - Follow-up period length in months

Study Quality

Reviewers noted whether the study authors reported fidelity of treatment (i.e., quality, intensity, and comprehensiveness of the intervention actually delivered to participants). They also characterized the scientific rigor and generalizability of the evaluation. Reviewers rated strength of evidence on a scale of “0” (focus groups, interviews, case studies) to “5” (Randomized Control Trial; see Exhibit 3-2). Generalizability was rated on a scale of “1” (generalizable only at the local level or to a single disability group) to “5” (nationally representative sample including youth with multiple types of disabilities).

Exhibit 3-2. Rating Summary for Scientific Rigor and Generalizability

<table>
<thead>
<tr>
<th>Ratings of Strength of Evidence</th>
<th>Description</th>
</tr>
</thead>
</table>
| 5                               | Experimental design, or randomized control trial (RCT), with:  
  • Overall attrition less than 65 percent and differential attrition less than 10 percent; AND  
  • Intent to treat analysis (no noncompliance, or failures to adhere to RCT protocol); AND  
  • No confounding factors; AND  
  • Symmetric outcome data collection in treatment and control groups; AND  
  • Analysis includes statistical adjustments for selected baseline characteristics on which equivalence between experimental groups was not established |
| 4                               | Experimental design with:  
  • No confounding factors; AND  
  • Symmetric outcome data collection in treatment and control groups; AND  
  • Attrition is less than 65 percent and differential attrition is less than 10 percent. |
| 3                               | Quasi-experimental design, or experimental designs not included above, with:  
  • Concurrent comparison cases; AND  
  • Established baseline equivalence of treatment and comparison groups OR adjustment for baseline differences; AND  
  • Symmetric outcome data collection in treatment and control groups; AND  
  • Nonexperimental causal studies using propensity score matching (or case control designs) to correct for sample selection bias in observational or nonrandomized data |
| 2                               | Quasi-experimental design with:  
  • Poor equivalence of treatment and comparison group (standardized differences exceeding 0.25 on any baseline variables); OR  
  • Unknown baseline equivalence; OR  
  • Time series or pre-post studies with no comparison group |
| 1                               | Correlational study:  
  • Simultaneous measurement of treatment and outcome variables; AND  
  • Study did not assign participants to treatment groups before or after the outcome was measured |
| 0                               | Focus groups, interviews, case studies, qualitative studies |
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#### Ratings of Generalizability

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Nationally representative of youth with multiple impairment types</td>
</tr>
<tr>
<td>4</td>
<td>State-wide sample representative of youth with multiple impairment types</td>
</tr>
<tr>
<td>3</td>
<td>State or nationally representative of youth with one impairment type</td>
</tr>
<tr>
<td>2</td>
<td>Local geography (e.g., metropolitan statistical area or city), involving youth with a wide variety of impairments</td>
</tr>
<tr>
<td>1</td>
<td>Local geography (e.g., metropolitan statistical area or city), involving youth with a specific type of impairment</td>
</tr>
</tbody>
</table>

#### 3.2 Other Data Sources

While the synthesis of evidence from the literature described above provides the foundation for the policy recommendations in this report, reviewers also considered: (1) public comments and recommendations submitted to SSA in response to requests posted in the *Federal Register* (SSA-2017-0049); (2) three reviews commissioned by other federal agencies (Honeycutt, et al., 2018; National Academies of Science, Engineering, and Medicine, 2018), and (3) 222 contextual studies, literature reviews, and other systematic reviews.
4. Work-Based Experiences and Services

This chapter describes the research evidence on five broad categories of work-based experiences and services: job placement assistance, on-the-job supports, supported employment, work experience, and on-the-job training. These five types of experiences and services often occur together, but are treated as five distinct categories in VR and other workforce systems.

- **Job search and job placement assistance** include activities that support a job seeker in searching and applying for an appropriate job. Examples of these activities include helping with resume preparation, identifying appropriate job opportunities, developing interview skills, making contacts with companies on behalf of the job seeker, or making a referral to a specific job.

- **On-the-job supports** are services provided to an employed individual with the aim of maintaining the individual’s expected job performance and improving job retention. This includes services such as job coaching, periodic or regular check-ins, and job retention services that may be provided in the short term or on an ongoing basis.

- **Supported employment** is defined in Department of Education regulations as competitive employment in an integrated work setting with ongoing support services for individuals with the most severe disabilities (34 C.F.R. 363.6(c)). Supported employment is operationally defined as a service delivery model that includes services provided in the competitive employment context, voluntary consumer participation, a rapid job search, integrated rehabilitation and mental health services, individualized support, a focus on consumer preferences, and ongoing support (Bond, et al., 2008). It includes individualized supports consistent with the strengths, abilities, interests, and informed choice of the individuals involved and is designed for individuals with the most significant disabilities (WIOA, 2014, Public Law 113-128).

- **On-the-job training** consists of training in specific job skills while working for a prospective employer. Trainees may or may not receive offers to continue in the same or a similar paid job after completing training. This category includes internships and apprenticeships conducted or sponsored by an employer, a group of employers, or a joint apprenticeship committee.

- **Work experience** includes work in any setting. These experiences may help an individual learn skills specific to certain types of work, or they may support an individual in learning general employment skills that can be used in any job setting.

All programs currently named as Section 301-approved programs may include work-based experiences and services, and both the Youth Transition Demonstration (YTD) and PROMISE demonstrations primarily focused on providing work-based experiences and services, as indicated in Exhibit 4-1. The first part of this chapter describes the evidence from evaluations of Section 301-approved programs that work-based experiences and services lead to employment. Next, this chapter describes the evidence from evaluations of programs not specifically approved under Section 301. This chapter concludes by characterizing the research on outcomes associated with work-based interventions (whether implemented within VR or an approved SSA demonstration, or by a community-based organization or other entity).
4. WORK-BASED EXPERIENCES AND SERVICES

Exhibit 4-1. Work-Based Experiences and Supports in Programs Listed in Section 301

<table>
<thead>
<tr>
<th>Intervention Component</th>
<th>IEP</th>
<th>IWP, Ticket to Work (TTW), Self-Sufficiency</th>
<th>IPE/VR</th>
<th>PASS</th>
<th>YTD</th>
<th>PROMISE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job search and job placement assistance</td>
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<td>✔</td>
<td>✔</td>
<td>✔</td>
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<td>✔</td>
</tr>
<tr>
<td>On-the-job supports</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Supported employment</td>
<td>✔</td>
<td></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>On-the-job training</td>
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<td></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
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</tr>
<tr>
<td>Work experience</td>
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<td></td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
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</tbody>
</table>

4.1 Work-Based Experiences and Services in Community-Based Services Listed in Section 301

This section describes the evidence that work-based experiences and services delivered through community-based services specifically named in Section 301 increase the likelihood of employment for SSI transition-age youth. Of the 30 studies in this category, 22 reviewed data about VR participants, five describe findings from PROMISE, two describe outcomes of students with IEPs, and one describes the outcome of a program linking students with IEPs to state VR agencies (Jobs for Youth). Where appropriate the text reports impact estimates, providing a numerical estimate only if it was statistically significant. This section presents evidence for each of the five types of work-based experiences and services defined in the chapter introduction.

We note at the outset that the range of services provided by VR agencies is very broad. As a result, we present evidence on various types of VR services in this chapter (work-based experiences and services) and in Chapters 5 (counseling) and 6 (postsecondary education). We found one study that assesses the effect of the entire range of VR services together. Hoffman, et al. (2018) found that 13 years after VR receipt, youth SSI recipients who participated in VR were more likely to have substantial earnings and less likely to receive SSI than youth SSI who did not participate in VR, controlling for observable baseline characteristics.

4.1.1 Job Search and Job Placement Assistance

The evidence review identified 7 studies that analyze the effect of job search assistance on youth with impairments and 12 studies that analyze the effect of job placement assistance. All of the studies compared youth VR clients who received the specified intervention as a VR service to those who did not receive the intervention.

Two articles examining employment outcomes across all impairment types reported that youth VR clients who received job placement assistance were an estimated 3.4 times (Alsaman & Lee, 2017) to 5.5 times (Oswald, 2016) more likely to be competitively employed at VR case closure (i.e., at 90 days after VR services ended). Statistical controls were used in one study to control for the effects of demographics, receipt of public cash support, state unemployment rate, and other variables (Alsaman & Lee, 2017).

All of the studies on job search assistance and nine of the studies on job placement assistance among transition-age youth VR clients reported results by impairment type.

- Attention deficit/hyperactivity disorder (ADHD): Glynn and Schaller (2016) found that youth ages 16-19 and youth ages 20-24 who received job placement assistance were an approximated
4. Work-Based Experiences and Services

2.2 and 1.7 times more likely to obtain successful employment, respectively. Youth ages 16-19 and youth ages 20-24 who received job search assistance were an estimated 1.6 and 1.9 times more likely to obtain successful employment, respectively.

- **Autism spectrum disorder**: Five studies of youth VR clients with autism reported that those who received job placement assistance were 2.3 to 4.1 times more likely to be competitively employed at VR closure (Kaya, et al., 2016; Kaya, et al., 2018; Migliore, et al., 2012; Chen, et al., 2015; Sung, et al., 2015). Estimates varied by youth, age, gender, and year of VR case closure.

Three out of five studies of youth VR clients with autism reported that those who received job search assistance were 1.34 to 1.57 times more likely to be competitively employed at VR closure (Kaya, et al., 2016; Migliore, et al., 2012; Sung, et al., 2015). Two studies did not find a statistically significant difference (Chen, et al., 2015; Kaya, et al., 2018). Results differ due to variations in regression model specifications and analysis of different years’ data.

- **Learning disabilities**: Ji, et al. (2015) examined two samples of youth VR clients with learning disabilities who received job placement assistance and reported that they were 2.2 to 2.8 times more likely to obtain competitive employment.

- **Intellectual disabilities**: Kaya (2018) found that youth VR clients with intellectual disabilities who received job placement assistance were approximately 3.2 times more likely to obtain successful employment.

- **Visual impairments**: Youth VR clients with visual impairments who received job placement assistance were an estimated 2.1 times more likely (Cimera, et al., 2015) and 2.0 times more likely (Giesen & Cavenaugh, 2012) to obtain successful employment than those who did not. VR clients with visual impairments who received job search assistance were estimated to be 1.6 times more likely to obtain successful employment than those who did not (Cimera, et al., 2015).

**CONCLUSION**: In five of the seven descriptive, correlational studies about VR clients, receipt of job search assistance was positively correlated with youth employment (with all seven accounting for participation in other VR activities). Similarly, once participation in other VR activities was accounted for, all of the studies reported that youth receiving job placement assistance experienced improved employment outcomes.

4.1.2 On-the-Job Supports

Nine studies of youth VR clients reported employment outcomes for samples of VR clients who received on-the-job supports. All of these studies accounted for participation in other VR activities, and all but one (Oswald, 2016) accounted for demographic characteristics. All reported statistically significant higher likelihood of employment at VR closure for recipients of on-the-job supports than for nonrecipients. Two studies examined the benefits of on-the-job supports across impairment groups. They reported that recipients were 1.2 times (Berry & Caplan, 2010) to 1.8 times (Oswald, 2016) more likely to be employed at VR closure than nonrecipients. Seven studies examined outcomes by impairment type:

- **ADHD**: Glynn and Schaller (2017) reported that youth VR clients with ADHD who received on-the-job supports were more likely to be employed at VR exit (ages 16 to 19, 73 percent of

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8 Giesen & Cavenaugh (2012) analyzed a factor they term “job placement assistance” that is a sum of job placement, job search, on-the-job supports, and on-the-job training.
recipients and 52 percent of nonrecipients were employed; ages 20 to 24, 77 percent and 55 percent were employed) than those who did not receive on-the-job supports.

- **Autism spectrum disorder**: Four studies reported that youth VR clients with autism who received on-the-job supports were 3.0 to 4.3 times more likely to be employed at VR exit than youth VR clients with autism who did not receive those supports (Kaya, et al., 2018; Kaya, et al., 2016; Chen, et al., 2015; Sung, et al., 2015).

- **Intellectual disability**: One study reported that youth VR clients with intellectual disabilities who received on-the-job supports were 2.8 times more likely to be employed at VR exit than youth VR clients getting other interventions (Kaya, 2018).

- **Visual impairments**: One study reported that youth VR clients with visual impairments who received on-the-job supports were 2.3 times more likely to be employed at case closure than youth VR clients with visual impairments who did not get on-the-job supports (Cimera, et al., 2015).

**CONCLUSION**: Across all nine studies identified, we found consistent evidence in descriptive, correlational studies that provision of on-the-job supports delivered in the context of VR is associated with a greater likelihood of employment at case closure for transition-age youth with disabilities.

### 4.1.3 Supported Employment

Supported employment is competitive or customized employment in an integrated work setting. It includes ongoing on-the-job supports as well as rapid job search assistance and integrated rehabilitation services (Bond, 2004).

We identified two studies that examine the association between receipt of supported employment in the context of VR and employment status at case closure for transition-age youth. Both found a positive relationship. One study of VR clients examined supported employment provided to youth with intellectual disability, autism spectrum disorder, traumatic brain injury, and cerebral palsy. It found that those who received supported employment were 12 percentage points more likely to be employed at VR closure than a propensity-score matched comparison group that did not receive supported employment (Wehman & Chan, et al., 2014). This finding offers quasi-experimental evidence (which is stronger than correlational evidence) because of its propensity score design. Another quasi-experimental study estimated that supported employment led to a 7.8 percentage point increase in the likelihood of employment at VR closure for youth with intellectual disability, autism, or schizophrenia compared to a propensity-score matched comparison group that did not receive supported employment (Chan & Kregel, 2019). The effect was strongest for transition-age youth with intellectual disability or autism who received SSI disability benefits (15 percentage point difference in employment outcomes; 48.6 percent of those receiving supported employment were working compared with 33.6 percent of a matched group of VR clients who did not receive supported employment).

**CONCLUSION**: There is quasi-experimental evidence that receipt of supported employment in the context of VR increases the likelihood of employment upon case closure.

### 4.1.4 On-the-Job Training

Eight studies examined the association between on-the-job training and competitive employment for VR clients. Two studies examined outcomes across multiple impairment populations. In a study of 3,215 VR clients referred for services before age 22, those who received on-the-job training were 3.12 times more
likely to be employed than nonrecipients at VR closure (Oswald, 2016). A study examining outcomes for nearly 14,000 SSI recipients ages 16 to 22 years, two years after VR case closure, reported no statistically significant difference in employment status between those who did or did not receive on-the-job training (Berry & Caplan, 2010). Seven studies examined outcomes associated with on-the-job training for youth VR clients with specific types of impairments, offering mixed evidence:

- **ADHD**: One study examined outcomes associated with on-the-job training for 8,024 VR clients ages 16 to 19 years with ADHD. That study found an estimated 78 percent of VR clients who had received on-the-job training were employed compared to 55 percent of participants who had not received on-the-job training (Glynn & Schaller, 2017), after taking into account client race, ethnicity, high school graduation, postsecondary education, and receipt of public support at application.

- **Autism spectrum disorder**: Five studies examined employment outcomes associated with the provision of on-the-job training for youth VR clients with autism. For youth VR clients with autism, Kaya and co-authors found mixed evidence that those who receive on-the-job training have better employment outcomes than those who do not (Kaya, et al., 2016; Kaya, et al., 2018). Another study of VR clients with autism reported that receipt of on-the-job training was associated with an increased likelihood of employment at VR closure for youth ages 19 to 25 years old but not for youth ages 14 to 18 years old (Chen, et al., 2015). Another study found no differences in employment at VR closure based on reception of on-the-job training for males or females with autism (Sung, et al., 2015).

- **Visual impairments**: A study of VR clients with visual impairments found no differences in employment at case closure based on whether the individuals received on-the-job training (Cimera, et al., 2015).

**Jobs for Youth.** The Jobs for Youth program was a consortium including the University of Illinois at Chicago, a local charter school, and a local state VR agency funded through the Add Us In demonstration run by the Department of Labor’s Office of Disability Employment Policy. The demonstration is concluded. Jobs for Youth offered several services, but as the name suggests it focused on work-based experience, offering on-the-job training via eight-week paid internships for special education students. Comprehensive case management services supported participants in understanding how work would interact with their benefits, accessing transportation, building good financial habits (e.g., opening bank accounts), and cultivating safety, all within the context of a relationship with the student’s family. The program provided new clothing for interviews or job tasks. A job developer assisted employers to identify credentials the students would need, and the case manager completed the necessary paperwork and helped students identify training and internship opportunities.

An evaluation of the Jobs for Youth program examined outcomes for 116 minority students ages 18 years or older. The students, who had various disabilities and IEPs, attended one inclusive charter school serving school dropouts at 20 sites in low-income neighborhoods in Chicago (Balcazar, et al., 2018). The evaluation used a time series analysis with no random assignment and no control group. In all, 110

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students (95 percent) graduated from high school. Thirteen (11 percent) were hired after completing internships, 15 (13 percent) enrolled in college classes after graduation, and 41 students (35 percent) found jobs and had their VR cases successfully closed after 90 days of employment. By comparison, among students accepted for VR services in the state over a five-year period only 9.2 percent reached successful VR closure.

CONCLUSION: We found mixed evidence regarding the association between on-the-job training received in the context of VR services and employment outcomes. In the studies based on VR client data, the association of on-the-job training and employment varied by impairment type, age, and time to follow up. Offered in the context of a comprehensive support program (i.e., Jobs for Youth), on-the-job training may have led to improved outcomes.

4.1.5 Work Experience

We reviewed two articles with evidence on the association between work experience and subsequent employment outcomes, a systematic review on the same topic, and five articles about youth participating in the PROMISE demonstration.

There is evidence that youth with IEPs who have work experience during high school are more likely to be employed at various follow-up periods. In a national longitudinal study of high school youth with IEPs, Wehman, et al. (2015) found that students who had work experience during high school were approximately 1.4 times more likely to be employed six years after leaving school than students who did not have employment experiences in high school. Another study reported that among high-school special education students with cognitive disabilities, autism spectrum disorder, or multiple disabilities, having a job in the spring semester of high school was associated with an estimated 5.2 greater likelihood of obtaining competitive employment, sheltered work, or unpaid work during the summer (Carter, et al., 2010).

Mazzotti, et al. (2016) conducted a systematic review of 11 research articles based on data from the same longitudinal dataset used by Wehman, et al. (2015), finding that four articles provided evidence supporting the effectiveness of paid employment or work experiences in high school for employment status after graduation (Carter, et al., 2012; McDonnall, 2011; McDonnall & O’Mally, 2012; and Wagner, et al., 2014).10

PROMISE. Established in 2013, PROMISE involved six demonstration projects across 11 states, each site with five years’ funding for demonstration. Although the intervention has concluded, analysis of its outcomes is ongoing. Future findings, and the findings thus far, are informative about the effective interventions for SSI youth. Beneficiaries who participated in this demonstration were youth ages 14 to 16 (at enrollment) who were receiving SSI. While the demonstrations varied, all included case management, benefits counseling, financial literacy training, work-based learning experiences, and self-determination training. All service components were aimed toward the singular goal of gaining work experience during the study and increasing the likelihood of employment after the study ends. Final cross-project results of the randomized control trial demonstration have not yet been published, but an interim evaluation (Mamun, et al., 2019) and three additional studies published in 2019 (Ipsen, et al., 2019; Hartman, et al., 2019; and Williams, et al., 2019) provide early findings:

10 These 11 studies differed in part by having different target populations, largely by impairment type.
4. WORK-BASED EXPERIENCES AND SERVICES

- **Any paid employment**: All six PROMISE projects increased youth employment during the first 18 months after enrollment (Mamun, et al., 2019), with impacts ranging from 5 to 19 percentage point increases. Four out of six PROMISE projects increased youth earnings in the year between 6 and 18 months after enrollment (Mamun, et al., 2019).

- **Total earnings**: PROMISE participants at three of the six study sites had significantly higher earnings in the year before the interim survey when compared to youth in the randomly assigned control groups. PROMISE youth earned, on average, $393 to $1,092 more in the year before the survey than control group youth.

If long-term PROMISE results support the usefulness of work experience, then SSA could consider adding language to Section 301 that an appropriate program might combine work experience with case management and other supports as the PROMISE interventions did.

**CONCLUSION**: We found evidence that work experiences are related to a greater likelihood of employment after high school. Although the data from the PROMISE study are still being evaluated, the preliminary findings suggest that work experience combined with case management and other supports can lead to an increase in employment. Longer-term follow-up data are necessary, however, because short-term follow-up data may confound intervention receipt (work experience) with the desired outcome (employment in the long run). Additional results from the PROMISE demonstrations are pending and should provide more evidence about the types of work experiences that are most beneficial for transition-age youth.

4.1.6 **Summary of Work-Based Experiences and Service in Section 301**

Job search assistance, job placement assistance, on-the-job-supports, on-the-job-training, and work experience can be features of all Section 301-approved programs, and supported employment can be a feature of most. The literature meeting this report’s selection criteria (a focus on transition-age youth with impairments, and evidence regarding a program’s impact on employment outcomes) is not expansive. Still, we found some evidence from studies that focused on participants in VR, PROMISE, and IEPs which are programs approved under Section 301.

- **Job search assistance and job placement assistance**: There is mostly positive, correlational evidence suggesting that job search assistance is associated with improved employment outcomes. There is consistently positive, correlational evidence that job placement assistance is associated with improved employment outcomes.

- **On-the-job supports**: There is consistently positive, correlational evidence that on-the-job supports are associated with improved employment outcomes.

- **Supported employment**: There is quasi-experimental evidence that receipt of supported employment increases the likelihood of employment upon case closure in the context of VR.

- **On-the-job training**: Our literature search criteria yielded no definitive conclusions about on-the-job training interventions, as there is mixed evidence from VR. The Jobs for Youth demonstration project suggests that on-the-job training can be successful when paired with other comprehensive services, including case management.

- **Work experience**: There is descriptive, correlational evidence that students with IEPs who experience supported employment are more likely to be employed years later, but some studies
failed to find a statistically significant effect. The PROMISE demonstration offers positive interim experimental evidence, but analysis of longer-term follow-up data is still pending.

The next section examines the evidence of these work-based intervention components on employment for youth enrolled in community-based services not named in Section 301.

4.2 Work-Based Experiences and Services in Community-Based Services Not Listed in Section 301

This section describes the evidence from evaluations of programs not clearly approved under Section 301. The evidence is organized by the same set of program components as in the previous section. Many studies of outcomes associated with work-based experiences for transition-age youth in community-based organizations incorporated a blend of different interventions as part of a demonstration project, or description of a model of interventions. In this section, we organize findings based on the primary component of each intervention (while including a description of secondary program components). Only work-based experience interventions in community-based organizations with research evidence regarding effectiveness for transition-age youth are included in this section.

4.2.1 Job Search and Job Placement Assistance

The evidence review did not identify evaluations of any community-based services that could offer evidence about job search assistance or job placement assistance (i.e., where the service had job search assistance or job placement assistance as a primary component or object of analysis).

4.2.2 On-the-Job Supports

The evidence review did not identify evaluations of any community-based services that could offer evidence about on-the-job supports (i.e., where the service had on-the-job supports as a primary component or object of analysis).

4.2.3 Supported Employment

As mentioned in the introduction of this chapter, supported employment is defined in Department of Education regulations as competitive employment in an integrated work setting with ongoing support services for individuals with the most severe disabilities. The evidence review found articles offering evidence about supported employment in programs and service models not explicitly named in Section 301 policy: Project SEARCH, Individual Placement and Support, the Recovery after an Initial Schizophrenia Episode (RAISE) Connection program, the Employment Intervention Demonstration, and Bridges from School to Work.

Project SEARCH. Project SEARCH is an ongoing, employer-based employment training and placement program targeting individuals ages 18 to 21 years old. Project SEARCH was developed at Cincinnati Children’s Hospital Medical Center in 1996 and has licensed project sites both in the United States and in other countries. It is conducted in partnership between special education, local rehabilitation programs, the state VR program, and host employers. Project SEARCH is considered to be primarily supported employment, with job coaching (funded through VR) and unpaid internships (provided by businesses) aimed at enabling the supported employment experience. A descriptive study reported high likelihood of permanent paid employment and improved job readiness after program completion (Müller & VanGilder, 2014), but there is also more rigorous evidence:

- A randomized experiment of Project SEARCH with 40 youth with autism spectrum disorder found that those assigned to the treatment group were 81 percentage points more likely to be
4. WORK-BASED EXPERIENCES AND SERVICES

competitively employed one year after the intervention began (Wehman & Schall, et al., 2014). Another randomized experiment involving 91 youth combined Project SEARCH with autism-specific supports and found similar effects: youth assigned to the treatment group were 75 percentage points more likely to be competitively employed one year after the intervention began (Wehman, et al., 2017).

- A multi-site randomized experiment studying 156 youth with autism found that participants assigned to the treatment group were an estimated 5.8 times more likely to be employed at the time of graduation (when 81 percent of participants were employed) and 4.5 times more likely to be employed 12 months after graduation (when 91 percent of participants were employed) compared to youth who did not participate in Project SEARCH (Wehman, et al., 2019). Participants in the treatment group also earned higher hourly wages and worked more hours per week 12 months after graduation than did control group members.

Individual Placement and Support (IPS). The IPS model is a standardized, evidence-based supported employment model for adults with psychiatric illness (Bond, et al., 2008). The IPS model is primarily a supported employment model that also incorporates integrated vocational and mental health treatment services, job search and job placement assistance, short-term benefits counseling, job search assistance within the first month of enrollment, and individualized follow-along services. A review of randomized control trial studies of IPS located 11 studies that tested implementations of IPS that closely match the intended design of IPS; i.e., have high fidelity (Bond, et al., 2008). Across the studies, 61 percent of IPS participants obtained competitive employment compared to 23 percent of those in the control groups. Of those competitively employed, approximately 66 percent worked 20 hours or more per week. In all these studies, participants were adults. Honeycutt, et al. (2018) rated the IPS model as a promising vocational rehabilitation service delivery practice based on research evidence from studies of adult participants.

Our evidence review found no randomized control studies of the effectiveness of IPS for transition-age youth, and nonexperimental studies of IPS for youth are very small. Three studies of the IPS model reported outcomes for transition-age youth:

- In one study, the IPS model was adapted for homeless youth with mental illness (Ferguson, et al., 2011). Outcomes for 20 youth adults who received IPS services from one community-based provider were compared to outcomes for 16 young adults receiving standard care from another community-based provider. Participants in the treatment group were 9.4 times more likely to have ever worked during the ten-month study, and 7.8 times more likely to be working at follow-up. This small study used convenience samples for both groups and did not control for possible differences between participants at baseline.

- Noel, et al. (2018) examined 10 programs using the IPS model in Illinois serving youth with developmental disabilities or mental illness. Across the programs, the proportion of participants who were working increased from 11.7 percent in the first quarter to an average of 36.3 percent in the project’s fourth quarter.

- A study of 65 participants ages 15 to 35 years followed participants in the Recovery after an Initial Schizophrenia Episode (RAISE) program for two years (Humensky, et al., 2017). RAISE is a concluded demonstration project of the National Institute of Mental Health that was launched in 2008. The participants of RAISE were people who had recently experienced psychosis for the first time. The program focused on using the educational and employment elements of the IPS
model, and the program goal for participants was to encourage participation in school or work. Almost all participants who engaged in school or work did so within the first year of the program. The proportion of participants who had engaged in school or work (or both) was 68 percent 6 months after program entry and 78 percent 12 months after entry. This difference was not tested for statistical significance.

With both the experimental evidence suggesting positive effects for a broad age range and three nonexperimental studies focusing on youth that offer positive findings, we conclude that IPS is likely to be effective for youth. However, more research evidence is needed.

**Employment Intervention Demonstration Project.** Burke-Miller, et al. (2012) reported employment outcomes for 1,272 transition-age youth with mental health disabilities in seven states who participated in the Employment Intervention Demonstration Project. Assignment to supported employment had no statistically significant effect on either employment or competitive employment for youth ages 18-24. However, assignment to supported employment increased competitive employment for young adults ages 25-30.

**Bridges from School to Work.** The Bridges program, developed by the Marriott Foundation, offers supported employment, along with vocational counseling, assessment, job placement, and job readiness training through nonprofit community agencies. Before 2000, Bridges was offered to 3,024 special education high school students in their last year of school (Luecking & Fabian, 2000). Seventy percent of participants completed an internship through the program. At six months after the end of the program, 68 percent of participants who responded to the follow-up were employed. At 12 months, 53 percent of participants who responded to the follow-up were employed. At 18 months, 60 percent of those who responded to the follow-up were employed. Rates of response to the follow-up were low.

Several studies examined the updated “Bridges Plus” program (e.g., Fabian, 2007; Garcia-Iriate, et al., 2007; Gold, et al., 2013; Tilson & Simonsen, 2013). In Bridges Plus, the program was expanded from a three-month internship to a program lasting 15 to 24 months (Hemmeter, et al., 2015). Hemmeter, et al. (2015) compared 11,067 “Bridges” or “Bridges Plus” participants ages 16 to 23 years in nine large U.S. metropolitan areas who had completed the internship with a sample of similarly aged SSI recipients who did not participate. By age 20, 82 percent of Bridges participants had earnings compared to 36 percent of comparison group; this wide difference persisted through age 30. The percentage with earnings above the annualized federal minimum wage was 19 percent for participants versus 4 percent for nonparticipants at age 20; this wide difference increased by age 25. The proportion receiving SSI benefits at follow-up was 7 percent for Bridges participants compared to 73 percent for the comparison group. Finally, average cumulative SSI and SSDI benefits paid through age 20 was $5,368 for the Bridges group and $20,624 for the control group. Honeycutt, et al. (2018) rated the Bridges program as having moderate causal evidence, as being a high-cost intervention, and as being replicable and scalable.

**Supported Employment and Supported Education for Emerging Adults.** Ellison, et al. (2015) reported outcomes for 35 transition-age participants with serious mental health conditions participating in the Supported Employment and Education for Emerging Adults program. This intervention included supported employment, along with postsecondary education and peer mentoring. Eight (24 percent) of the 33 participants who chose to explore employment actually started one or more jobs during 12 or more months in the program. Overall, 15 (68 percent) of the 22 participants who expressed interest in pursuing educational goals started one or more educational programs. Of those 15 participants, 6 (40 percent) completed a certificate high school diploma or college courses.
CONCLUSION: Of the community-based supported employment programs reviewed, Project SEARCH and the Bridges program have causal research evidence supporting their effectiveness for transition-age youth. The IPS model has causal research support for people across the age spectrum but less persuasive evidence regarding transition-age youth. The Employment Intervention Demonstration Program was effective for older participants but not for transition-age youth with mental health disabilities. At this time, the much smaller Supported Employment and Supported Education for Emerging Adults program does not have conclusive evidence about its effectiveness.

4.2.4 Work Experience

Supported employment (Section 2.3.4) is a type of work experience intervention. More broadly, work experience interventions can include work in any setting and with any level of support. As it is broader than supported employment, work experience does not necessarily involve ongoing on-the-job supports. Also, a work experience intervention may engage youth with a broader range of impairments than supported employment interventions, which tend to serve only youth with the most severe disabilities.

Job Corps. The Job Corps program serves approximately 50,000 economically disadvantaged youth facing educational or employment barriers. The program provides work-focused supports for education, vocational training, medical exams, treatment and counseling for mental health and emotional problems, soft skills development (including social skills), job placement, and job retention supports. Eligibility criteria include income, specific educational or employment barriers, a determination that Job Corps can meet the applicant’s need for additional education or training, and determination that the applicant can reasonably be expected to succeed (Hock, et al., 2017). During their nine-month enrollment participants typically reside on campus; receive a living allowance; and receive free meals, recreation activities, driver education, on-site child care, and substance abuse treatment. While youth with disabilities were not originally targeted for participation in Job Corps, those youth are now served by the program.

Hock, et al. (2017) evaluated the impact of participating in the Job Corps program for youth with a serious physical or emotional problem that limited their work or daily activities. The authors used data from the National Job Corps Study, which enrolled applicants between 1994 and 1996. The sample included 271 youth randomly assigned to participate in Job Corps and 201 youth who were not. Those assigned to Job Corps who participated in Job Corps (73 percent of those assigned) completed an average of 1,810 hours of education and training compared to a counterfactual mean of 780 hours over four years. The proportion completing high school or earning a GED was 57 percent for participants compared with a counterfactual mean of 43 percent. Participant youth had earnings that were 29 percent higher during the first four years after enrollment than the counterfactual mean, and participant youth received only half of the SSI benefit counterfactual amount ($3,825) over four years. Honeycutt, et al. (2018) listed Job Corps as a low- or moderate-cost intervention with a high level of causal evidence that is replicable, scalable, and sustainable.

Anoka County Transition and Customized Employment. Rogers, et al. (2008) conducted a case study evaluation reporting outcomes for 475 transition-age youth with various types of disabilities participating in the five-year Anoka County Transition and Customized Employment program. The program included

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11 Hock, et al. (2017) reported complier average causal effects. For this study, these effects are essentially the effects on participating youth (73 percent of those assigned to Job Corps) relative to calculated counterfactual means. The counterfactual means are essentially the inferred means for those youth assigned to the control group who would have participated in Job Corps had they been assigned to Job Corps.
work-based experience, along with counseling and job readiness components, and family and impairment-specific supports. It did not include postsecondary or vocational training. The evaluation did not include a comparison group and did not report baseline data. Of the 475 transition-age youth, 293 (62 percent) worked in competitive employment. Of these 293, 81 percent maintained continuous employment for at least three months, 75 percent for at least six months, and 66 percent for at least one year.

**Targeted Secondary Transition Program (START).** The START program provided transition services to youth 14 to 21 years old with impairments who were eligible for VR services between 2004 and 2013 (Langi, et al., 2017). START provided employer-funded work experiences including job coaching and on-the-job evaluation and training. It also provides career exploration and job readiness development, job shadowing, and training in independent living skills. Langi, et al. (2017) used propensity score methods to match 2,211 START recipients with 2,211 VR clients with a completed IPE who were not in the START program. START recipients were more likely to be employed at case closure (61 percent for START participants; 53 percent for nonparticipants). Among START participants who were African American or who were Medicaid or Medicare recipients, the increases in likelihood of employment at case closure were even higher.

**CONCLUSION:** Experimental evidence suggests that work-based experiences provided through Job Corps can improve employment rates and reduce later dependence on SSI and SSDI for transition-age youth with disabilities, but the data are from an older study that enrolled participants more than 20 years ago. We did not find research evidence to support the effectiveness of any other community-based work-experience program (excluding supported employment) in improving employment outcomes for transition-age youth.

### 4.2.5 On-the-Job Training
The evidence review did not identify evaluations of any community-based services that could offer evidence about on-the-job training.

### 4.2.6 Summary of Work-Based Experiences and Services Not in Section 301
For community-based programs offered to transition-age youth, the evidence review identified studies of the effects of supported employment and more general work experiences on employment outcomes. The evidence review did not identify evaluations that offer evidence of job search assistance, job placement assistance, on-the-job supports, and on-the-job training, explicitly, except that those services are sometimes features of the supported employment and work experiences more broadly.

- **Supported employment:** Two small but multi-site programs offer causal research evidence supporting the effectiveness of supported employment for transition-age youth (Project SEARCH and Bridges). Still, the evidence is not consistent. The Employment Intervention Demonstration Program was effective for older participants but not for transition-age youth with mental health disabilities. The IPS model has causal research support for people across the age spectrum and positive but less scientifically rigorous evidence regarding transition-age youth.

- **Work experience:** There were no studies of recent outcome data (outcomes since 2000) that provide causal evidence regarding work experience interventions, met our search criteria, and described programs not already listed in Section 301. However, there is promising quasi-experimental data from the evaluation of START, and there are promising descriptive statistics of participants who completed the Anoka County Transition and Customized Employment Program. Dated experimental evidence suggests that work-based experiences provided through Job Corps
4. WORK-BASED EXPERIENCES AND SERVICES

can improve employment rates and reduce later dependence on SSI and SSDI for transition-age youth with disabilities.

4.3 Work-Based Experiences Summary and Recommendations

This chapter examines evidence available about several types of work-based experiences to identify interventions associated with improved employment and other outcomes for transition-age youth with disabilities. The design of state VR programs and their reporting requirements enables researchers to study evidence about job placement assistance, on-the-job supports, and on-the-job training from VR clients, explicitly. These types of work-based services may be components of supported employment and work experience interventions more broadly; for example, on-the-job training was a large component of the Jobs for Youth program. However, evidence from other Section 301-approved programs (i.e., programs not associated with VR) as well as evidence from programs not listed in Section 301 about these three specific intervention components is not available. Studies of VR clients consistently find positive associations between employment at VR case closure and receipt of job search assistance, job placement assistance, and on-the-job supports while enrolled in VR.

Most studies suggest that interventions that incorporate supported employment interventions improve employment outcomes particularly for SSI recipients with autism spectrum disorder or intellectual disability. From Section 301-approved programs, there is quasi-experimental evidence that receipt of supported employment in the context of VR increases the likelihood of employment upon case closure. Project SEARCH and Bridges are two smaller but multi-site programs not listed under Section 301 that offer causal research evidence supporting their effectiveness for transition-age youth. Still, the evidence for supported employment interventions is not entirely consistent. The Employment Intervention Demonstration Program was effective for older participants but not for transition-age youth with mental health disabilities. The IPS model has causal research support for people across the age spectrum and positive, but less scientifically rigorous, evidence regarding transition-age youth.

There is little to no evidence in Section 301-approved programs, as well as programs not explicitly named in Section 301, that work experience alone improves transition outcomes for youth with impairments. Programs that incorporate work-experience components for transition-age youth typically offer other services, also. PROMISE demonstrations, which were listed as being appropriate under Section 301, blended work experience and on-the-job training experiences with benefits counseling, financial literacy, parent education, secondary and postsecondary education, and case management services. The Bridges and Bridges plus programs combined supported employment and job placement support with vocational assessment and counseling. Project SEARCH blends job coaching and work experiences. PROMISE, Project SEARCH, and the Bridges Plus program offer experimental evidence that their interventions helped transition-age youth with impairments gain employment. Chapter 5 describes the evidence for nonwork-based supports and services that aid youth with impairments to transition to adulthood.
5. Counseling and Self-Determination

This chapter describes the research evidence regarding three types of counseling: benefits counseling, information and referral, and vocational rehabilitation counseling (in general, not necessarily through state VR agencies).

The chapter also describes research evidence regarding three types of training related to presenting oneself for work: job readiness training, self-advocacy training, and self-determination training.

These counseling and training programs are defined below:\(^{12}\):

- **Benefits counseling** consists of information about an individual’s Social Security and other federal and state benefits, with a particular focus on how earnings can affect benefits eligibility and amounts and how the individual can use work incentives to maximize economic self-sufficiency.

- **Information and referral** includes basic one-time or very short duration services, to answer questions about services available through the VR program or other providers. Information and referral services are less intensive than case management, which includes assistance in accessing and maintaining needed services and supports.

- **Vocational rehabilitation counseling** is supportive services necessary for an individual to achieve an employment outcome. This category also includes case management and system navigation services, eligibility determination and work-based assessment such as trial work experiences and extended evaluation.

- **Job readiness training** (including **soft skill training**) is training to prepare an individual for the world of work (e.g., appropriate work behaviors, methods for getting to work on time, appropriate dress and grooming, methods for increasing productivity, social skills, punctuality).

- **Self-advocacy training** provides instruction on how to advocate for oneself, for example, during a job interview.

- **Self-determination training** provides instruction to improve the ability to make one’s own informed and positive choices about life events, both large and small (e.g., self-direction skills, leadership, knowledge about rights, choice and decision-making skills; McDonnell, et al., 2009).

Every program approved under Section 301 includes at least two types of counseling and self-determination components as part of their services to youth in transition, as shown in Exhibit 5-1. Section 5.1 of this chapter describes the evidence from evaluations of Section 301-approved programs that counseling and self-determination programs lead to employment. Section 5.2 of this chapter describes the evidence from evaluations of programs not clearly approved under Section 301. In Section 5.3, this chapter concludes by comparing evidence for programs named specifically in Section 301 to those not named specifically in Section 301.

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\(^{12}\) This evidence review did not examine peer mentoring programs. Kolakowsky-Hayner, et al. (2012) offer descriptive evidence of a peer mentoring program.
Exhibit 5-1. Counseling and Self-Determination Components of Programs Listed in Section 301

<table>
<thead>
<tr>
<th>Intervention Component</th>
<th>IEP</th>
<th>WIP, TTW, Self-Sufficiency</th>
<th>IPE/VR</th>
<th>PASS</th>
<th>YTD</th>
<th>PROMISE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benefits counseling</td>
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<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Information and referral</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vocational rehabilitation counseling</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Job readiness training (soft skills)</td>
<td>✓</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-determination training</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-advocacy training</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5.1 Counseling and Self-Determination Components in Community-Based Services Listed in Section 301

The 16 studies in this category reviewed youth outcomes for participants in VR (seven studies), the Youth Transition Demonstration (three studies), the PROMISE demonstration (two studies), IEPs (two studies), and WIPA (two studies).

5.1.1 Evidence for Benefits Counseling Interventions

Benefits counseling provides information to clients about federal benefits eligibility rules; in particular, how earnings affect benefit receipt. It is available for all SSI and SSDI recipients through WIPA, and has been a specific area of focus for several SSA demonstrations. An internal SSA report on WIPA found a clear and positive relationship between use of WIPA services (which include benefits counseling as well as referrals to Ticket to Work) and long-term improvements in earnings (Roessel, 2016). In accordance, a study of SSI recipients in Wisconsin reported statistically significant improvements in earnings associated with a benefits counseling intervention (Delin, et al., 2012). These two studies did not analyze youth, specifically.

Two studies that focused on youth VR clients reported outcomes associated with receipt of benefits counseling. One study reported that youth who participated in benefits counseling through the VR program were 17 percent more likely to be employed at case closure than youth in the VR program who did not (Oswald, 2016). However, in a study of youth with autism spectrum disorder, benefits counseling was not associated with differences in employment outcomes (Kaya, et al., 2018).

In Wisconsin PROMISE, participants were more likely to report employment income if they had received benefits counseling (76 percent versus 34 percent; Hartman, et al., 2019). Of all youth who had earnings above SGA, 80 percent had received benefits counseling, while only 53 percent of all youth had received benefits counseling (Hartman, et al., 2019). Also analyzing the participants in the Wisconsin PROMISE demonstration who were randomly assigned to the treatment group, Schlegelmilch, et al. (2019) found a positive association between receipt of benefits counseling and employment, and also between receipt of benefits counseling and earnings.

CONCLUSION: There is correlational evidence from the VR program and the Wisconsin PROMISE site suggesting that benefits counseling is associated with higher levels of employment or a greater likelihood of earnings above SGA. It is possible, however, that youth who were more likely to obtain employment with earnings above SGA were more likely to seek out benefits counseling within the program.
5. COUNSELING AND SELF-DETERMINATION

5.1.2 Evidence for Information and Referral Interventions

Information and referral services help individuals find assistance from other agencies not available through the VR program. Seven articles studied effect of information and referral interventions on employment outcomes for youth VR clients. Based on VR cases closed in 2006, Oswald (2016) found that youth who received information and referral services were 1.88 times more likely to be competitively employed at case closure than youth who did not receive those services. The remainder of the studies focused on youth with specific diagnoses:

- **Autism spectrum disorder:** Two studies of youth ages 19 to 25 with autism reported that participants who received information and referral assistance were less likely to be employed at case closure (Chen, et al., 2015; Kaya, et al., 2018). Studies of youth with autism ages 16 to 25 years and 14 to 18 years found no relationship between receipt of information and referral services and employment outcomes for transition-age youth (Kaya, et al., 2016; Chen, et al., 2015). Looking at VR cases closed in 2011, Sung, et al. (2015) found no differences in employment outcomes for male or female youth with autism spectrum disorder after controlling for demographics, age, receipt of federal benefits, and receipt of other VR service types.

- **Intellectual disabilities:** Kaya (2018) found no relationship between receipt of information and referral services and employment outcomes for transition-age youth with intellectual disabilities after controlling for demographic variables and receipt of other services.

- **Visual impairments:** Cimera, et al. (2015) found no evidence of an association between information and referral interventions and employment for youth with visual impairments.

**CONCLUSION:** One study reported improved outcomes for VR clients who received information and referral services, three reported no association, and two reported poorer outcomes. While information and referral services through VR may be important, once other VR interventions are accounted for, receipt of information and referral services did not predict improved employment outcomes for transition-age youth in most studies.

5.1.3 Evidence for Vocational Rehabilitation Counseling Interventions

The evidence review yielded five articles that studied the relationship between receipt of vocational rehabilitation counseling and employment outcomes. All of the studies refer to vocational rehabilitation counseling as offered through state VR agencies, although VR agencies are not the only providers of vocational rehabilitation counseling. Vocational rehabilitation counseling typically involves some combination of counseling, case management, and work-based assessment (but not necessarily all three).

**Counseling.** Vocational rehabilitation counseling, in general, consists of counseling and guidance services deemed necessary for an individual to achieve an employment outcome, including personal adjustment counseling; counseling that addresses medical, family, or social issues; vocational counseling; and any other form of counseling and guidance deemed necessary for an individual with an impairment to achieve an employment outcome. In this section, we will spell out “vocational rehabilitation counseling” when we are describing the generic service and use the acronym “VR” when referring specifically to state VR agencies.

Six articles studied the relationship between receipt of vocational rehabilitation counseling and employment outcomes using VR client data. All of them examined VR clients within specific impairment groups.
• **Autism spectrum disorder:** The majority of articles found that youth with autism who receive vocational counseling as part of VR are more likely to have competitive employment after participating in the program. Looking at VR cases closed in 2011, youth with autism spectrum disorder who received vocational rehabilitation counseling were 1.3 times (Kaya, et al., 2016) or 1.7 times (Chen, et al., 2015) more likely to have competitive employment than youth enrolled in VR services who did not receive vocational rehabilitation counseling. However, Kaya et al. (2018) found that for youth with autism spectrum disorder whose VR cases closed in 2013, vocational rehabilitation counseling was not significantly associated with employment rates. Sung, et al. (2015) found a significant association between counseling and guidance interventions for training through VR services and competitive employment for male youth with autism, such that male youth who received this counseling were estimated to be 2.4 times more likely to obtain competitive employment than male youth who did not receive the counseling. There was no statistically significant evidence for female youth with autism.

• **Visual impairment:** There is mixed evidence for youth with visual impairment regarding the association between vocational counseling as part of VR and competitive employment after participating in the program. Analyzing VR cases closed in 2010, Giesen & Cavenaugh (2012) found that receipt of vocational rehabilitation counseling improved the likelihood of competitive employment by an estimated 1.2 times for youth with visual impairments. However, Cimera, et al. (2015) using data from 2012 found no evidence of an association.

**Vocational Assessment Services.** Seven studies examined whether receipt of vocational assessment services as part of a Section 301-approved program was associated with employment outcomes. In the Wisconsin PROMISE program, participants who received vocational assessments were significantly more likely to have been employed than participants who did not (77 percent versus 62 percent; Hartman, et al., 2019).

Using data on students with IEPs, Wehman, et al. (2015) reported that youth with traumatic brain injury who received vocational assessment services were 17.0 times more likely to have been employed at any time since high school, and 7.3 times more likely to be employed at the last observation (up to eight years after high school).

Five studies reported outcomes for specific impairment groups of VR clients.

• **Autism spectrum disorder:** Four studies analyzing youth VR clients with autism reported no association between employment rates and receipt of VR assessment services (Kaya, et al., 2016; Kaya, et al., 2018; Chen, et al., 2015; and Sung, et al., 2015).

• **Visual impairment:** Cimera, et al. (2015) reported no association between employment rates and receipt of VR assessment services for youth VR clients with visual impairment.

**Case management services.** The application of our search criteria yielded one study reporting the impacts of case management specifically for youth with impairments. In the six-state consortium Achieving Success by Promoting Readiness for Education and Employment (ASPIRE) that is one of the PROMISE grantees, youth who received at least six case management contacts were 1.18 times more likely to be employed than those who did not (Ipsen, et al., 2019). Although Ipsen, et al.’s study did not make use of the experimental design and thus provides correlational evidence instead of causal evidence, it did take demographic variables and other intervention component receipt into account.
CONCLUSION: In the literature examined for this report, there is some correlational evidence regarding the association between vocational rehabilitation (lower case) counseling and employment outcomes. Two PROMISE demonstration sites show a positive association between elements of vocational rehabilitation counseling and employment. Studies of youth VR clients yield mixed evidence: some with positive evidence and others with no statistically significant evidence.

5.1.4 Evidence for Job Readiness Training Interventions

Five of the six studies examining the association between receiving job readiness training and employment outcomes studied VR clients. All of these studies reported outcomes by impairment type:

- **Autism spectrum disorder**: The evidence is mixed. For cases closed in 2011, Kaya, et al. (2016) found that youth with autism who received job readiness training were 1.2 times more likely to obtain competitive employment than youth enrolled in VR services who did not. However, two studies examining data for 2011 (Chen, et al., 2015; Sung, et al., 2015) and one study examining data for 2013 (Kaya, et al., 2018) reported no differences in employment rates for youth with autism associated with participation in job readiness training after accounting for the use of other VR interventions.

- **Visual impairments**: For youth with visual impairments, Cimera (2015) reported a caution regarding job readiness interventions. In this study, youth with visual impairments who participated in job readiness interventions as part of VR were less likely to be competitively employed than youth with visual impairments who did not participate in job readiness interventions, controlling for demographic characteristics and receipt of other VR services.

CONCLUSION: We found mixed evidence regarding a relationship between job readiness interventions and employment outcomes. Some studies reported improved outcomes, some reported no differences and some reported poorer outcomes. We cannot draw any definitive conclusions about these interventions based on the research evidence in the literature we examined for this report.

5.1.5 Evidence for Self-Advocacy Training Interventions

For students with traumatic brain injury who were had an IEP, Wehman & Chen, et al. (2014) found that self-advocacy skills were a significant predictor of competitive employment six years after exiting high school.

In contrast to a matched comparison group, youth in the treatment group of the Bronx Youth Transition Demonstration site who participated in Person-Centered Care self-advocacy training were more likely to have had at least one paid job than those who did not participate (76 percent versus 23 percent; Croke & Thompson, 2011).

Also in contrast to a matched comparison group, self-advocacy training participants in the Wisconsin PROMISE program were significantly more likely to report any employment than nonparticipants (79 percent versus 57 percent; Hartman, et al., 2019).

CONCLUSION: Quasi-experimental studies provide evidence that supports the effectiveness of self-advocacy training for improving education and employment outcomes for special education students.

5.1.6 Evidence for Self-Determination Training Interventions

Self-determination is an individual’s ability to control aspects of life that are important to them. Wehmeyer and Palmer (2003) reported that among 94 high school graduates with learning disabilities,
those with higher self-determination skills were more likely to be employed one and three years after high school graduation. These students were also more likely to be employed in a position that included benefits such as health insurance and paid sick leave. However, a national study of high school students with IEPs did not find a statistically significant link between self-determination skills while participants were in high school and competitive employment six years after exiting high school (Wehman & Chen, et al., 2014).

Among the treatment group in the Wisconsin PROMISE demonstration, those who participated in self-determination training were significantly more likely to have earned wages during the demonstration than those who did not (Hartman, et al., 2019). Among youth in the PROMISE ASPIRE demonstration, participation in self-determination training was not associated with differences in employment outcomes at 36 months (Ipsen, et al., 2019). However, the number of participants in PROMISE ASPIRE who received any intervention by 36 months was quite small. Additional evidence from the PROMISE evaluations is pending.

CONCLUSION. There is mixed correlational evidence regarding the effectiveness of self-determination training interventions for improving employment outcomes for transition-age youth.

5.1.7 Evidence for Blended Interventions Incorporating Counseling Components
The Colorado site of the Youth Transition Demonstration offers evidence on the effectiveness of counseling, case management, and self-determination training. The Colorado site recruited and worked with youth through One Stop Workforce Centers. The intervention included assessment, a person-centered plan specifying the services the youth needed to achieve their goals, service coordination, benefits counseling, and system navigation. Evidence about the effectiveness of these counseling components is available only as a blend, not for each component individually. Most participants received case management services (93 percent) and benefits planning services (88 percent). Fraker, et al. (2014) reported that all types of service were low intensity and reported no significant impacts of the YTD intervention at the Colorado site on earnings in any of the three years of the follow-up period. The authors found that the intervention increased employment by 5 percentage points (from 38 percent to 43 percent) in the second calendar year after enrollment but had no detectable effect on employment in the first and third years.

5.1.8 Summary of Counseling and Self-Determination Interventions in Section 301
Counseling and job readiness, self-determination, and self-advocacy training are features of Section 301-approved programs. Vocational rehabilitation counseling, in general, is arguably the main component of VR services. The literature meeting this report’s selection criteria (a focus on transition-age youth with impairments and evidence regarding a program’s impact on employment outcomes) is not expansive. Still, we found some evidence from studies that focused on VR participants, PROMISE participants, and high school students with IEPs and that are all approved under Section 301.

- **Benefits counseling:** There is correlational evidence suggesting that benefits counseling is associated with improved employment outcomes.
- **Information and referral:** There is mixed evidence that information and referral is associated with improved employment outcomes.
- **Vocational rehabilitation counseling:** Two PROMISE demonstration sites show a positive association between elements of vocational rehabilitation counseling and employment. Studies of
youth VR clients yield mixed evidence: some with positive evidence and others with no statistically significant evidence.

- **Job readiness training:** Based on the research evidence in the literature that we examined for this report, we cannot draw any definitive conclusions about these interventions, which were components of Section 301-approved programs.

- **Self-advocacy training:** Quasi-experimental studies provide evidence that supports the effectiveness of self-advocacy training for improving education and employment outcomes for special education students.

- **Self-determination training:** There is correlational evidence regarding the effectiveness of self-determination training interventions for improving employment outcomes for transition-age youth.

One reason that the evidence review does not provide consistent positive evidence may be due to the difficulty of attributing a specific service’s impacts after accounting for other co-occurring intervention components.

### 5.2 Counseling and Self-Determination Components in Community-Based Services Not Listed in Section 301

The evidence review yielded one article describing the effect on employment of a self-advocacy intervention outside of programs currently included in Section 301, and no articles on other specific types of counseling services, job readiness training, or self-determination training outside of programs already included in Section 301. In a small but randomized experiment, Smith, et al. (2015) found that virtual reality job interview training improved the odds of accepting a job or being accepted to a competitive volunteer post among youth with autism spectrum disorder. The study involved only 23 randomly assigned subjects, but the impact was statistically significant and large: study subjects who participated in the training were 28 percentage points (53 percent versus 25 percent) more likely to receive and accept a job offer within six months of completing the training than study participants who did not participate in the training.13 The evidence review yielded three additional articles investigating the effect of job interview training, all of which concluded that training can improve job interview skills but did not report effects on employment (Rosales & Whitlow 2019, Hayes, et al., 2015; Strickland, et al., 2013).

The evidence review yielded one article providing evidence on a blended intervention whose main focus was counseling. The Maryland Seamless Transition Collaborative blends academic instruction, work experience, self-determination training, benefits counseling, case management, system navigation, and other services. The program was funded by the Rehabilitation Services Administration in 2007 as a transition model demonstration and was implemented in 11 countywide school districts. Participation was open to high school students with disabilities who were potentially eligible for VR services. Participant outcomes were compared to outcomes of VR clients who did not participate in the program, and the inverse probability of treatment weighting was used to balance characteristics between participants and the comparison group (Luecking, et al., 2018). Program participants experienced shorter waits for eligibility determination, a higher probability of having an Individualized Plan for Employment, and

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13 The sample sizes were 15 and 8 for the treatment and control groups. When we recalculated statistical significance without covariates, we found this difference was not statistically significant, which increases our level of caution about accepting this finding at face value.
much shorter time between eligibility determination and IPE development. Program participants were more likely to be employed at VR closure (42 percent versus 23 percent; Luecking, et al., 2018). Honeycutt, et al. (2018) listed the Maryland Seamless Transition Collaborative program as a promising vocational rehabilitation service delivery practice with moderate causal evidence, as having moderate to high costs, as being replicable and scalable, and as being effective in increasing employment at VR closure.

Several of the blended programs described in the work-experiences chapter also incorporate counseling, case management, and other similar elements into their models. The Bridges program incorporates vocational counseling and job readiness training to produce improvements in employment as well as in reduction in the receipt of case benefits. The Job Corps program incorporates a robust array of treatment and counseling for mental health and emotional problems, soft skills development, and supports such as housing and medical treatment and was associated with improved employment outcomes. The Jobs for Youth program incorporated extensive case management and vocational rehabilitation counseling interventions with its work-based experience and vocational training components to produce dramatically better employment outcomes than standard VR services alone.

Since 2014, when WIOA legislation was signed, Centers for Independent Living have been expected to provide supports to enhance employment and independent living outcomes for transition-age youth. However, we did not find any research specifically evaluating the effectiveness of services provided through CILs for transition-age youth. These services could be the focus of new evaluation or research studies on WIOA outcomes.

### 5.3 Counseling and Self-Determination Summary

While few interventions in this section have published results from experimental studies showing their effectiveness, those with the strongest research evidence support are benefits counseling and self-advocacy training, which have consistent correlational evidence supporting their effectiveness and all of which have been tested in at least one study reporting results based on direct delivery of the intervention (rather than associations based on secondary data sources). However, benefits counseling is typically not an ongoing service, and thus we do not make recommendations about specifically including programs that solely offer benefits counseling (e.g., WIPA).

The only non-Section 301 interventions with causal evidence of improving youth outcomes are job interview training programs, which typically are fairly short engagements that would not warrant the youth’s (or SSA field officer’s) time in applying for continuation of SSI benefits for the short duration of the job interview training.

One reason for the lack of conclusive evidence may be that it is difficult to study the effect of specific components that often co-occur. Another reason for the lack of studies on this topic may be due to accepted, long-established expectation that counseling services are a crucial link to programs’ desired outcomes for youth with impairments.
6. Postsecondary Programs

This chapter describes the research evidence regarding programs that have a postsecondary education or vocational or occupational training component. Postsecondary programs are certified/accredited programs of study leading to an employment goal and include: (1) four-year degrees from a college or university; (2) two-year degrees from a community or technical college, and (3) vocational/occupational skills training programs leading to a certificate of completion from a community college, technical college, or private trade or technical school.

Participation in a postsecondary education and training program is usually not sufficient condition for approval of continued SSI receipt under Section 301. However, IEPs (prepared by schools) and IPEs (prepared by state VR agencies) may include the goal of postsecondary education or training. If an individualized plan articulates a postsecondary education or training goal, it will generally also articulate the specific employment outcome anticipated as a result of the training, and what agency or organization would administratively authorize the training, manage the case, and pay for the tuition or training fees. Exhibit 6-1 illustrates the programs approved under Section 301, which can include postsecondary programs.

Exhibit 6-1. Inclusion of Postsecondary Education and Training Programs in Programs Under Section 301

<table>
<thead>
<tr>
<th>Intervention Component</th>
<th>IEP</th>
<th>IWP, TTW, Self-Sufficiency</th>
<th>IPE/VR</th>
<th>PASS</th>
<th>YTD</th>
<th>PROMISE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postsecondary education (college, university)</td>
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<td></td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Occupational/vocational training</td>
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</tbody>
</table>

Section 6.1 of this chapter describes the evidence from evaluations of Section 301-approved programs that postsecondary programs lead to employment. Section 6.2 of this chapter describes the evidence from evaluations of programs not clearly approved under Section 301. In Section 6.3, this chapter concludes by comparing evidence for programs currently designated in Section 301 to those not currently designated in Section 301.

6.1 Postsecondary Education in Community-Based Services Listed in Section 301

6.1.1 Postsecondary Education

Sixteen studies examined employment outcomes for transition-age youth associated with postsecondary education within the VR program. Three of those studies examined all youth in the VR program. In all three, transition-age youth participating in VR who attended postsecondary education programs were significantly more likely than those who had not to be competitively employed 90 days after VR services ended (Alsaman & Lee, 2017; Oswald, 2016; and Berry & Caplan, 2010). VR recipients who participated in postsecondary education programs had earnings that were 1.8 times greater than nonparticipants 90 days after services ended with an even larger difference five years later (Berry & Caplan, 2010). However, VR participants with college and university training were less likely to be employed two years after VR case closure, possibly because they were still enrolled in their postsecondary program (Berry & Caplan, 2010).

Sixteen studies reported the effect of college or university education on employment outcomes for transition-age youth receiving one or more VR service.
6. POSTSECONDARY PROGRAMS

- **ADHD**: Glynn and Schaller (2017) found that youth VR clients with ADHD ages 16 to 19 years who participated in postsecondary education were significantly more likely to be employed at VR case closure than those who had not participated in postsecondary education.

- **Autism spectrum disorder**: Five studies of VR clients reported on the effectiveness of postsecondary education on employment outcomes for youth with autism. In one study, youth VR clients with autism ages 14 to 24 years who participated in postsecondary education were twice as likely to be employed at case closure than recipients with autism who did not participate in postsecondary education (Rast, et al., 2019). However, four other studies found no effect of postsecondary education on employment status for VR clients with autism spectrum disorder (Kaya, et al., 2016; Kaya, et al., 2018; Sung, et al., 2015; Chen, et al., 2015). All of the studies employed multivariate logistic regression to control for receipt of other VR services and for demographic characteristics.

- **Intellectual disability**: Among youth VR clients with intellectual disability, those who participated in postsecondary education had significantly higher weekly earnings (Cimera, et al., 2018; O’Neill, et al., 2015; and Sannicandro, et al., 2018); were more likely to be employed and worked more hours (Cimera, et al., 2018); and received lower monthly SSI payments (Sannicandro, et al., 2018) than those who did not participate in postsecondary education, after controlling for individual characteristics and participation in other VR services.

- **Learning disabilities**: Among youth VR clients ages 15-18 years with learning disabilities, postsecondary education participants were more likely to be employed at case closure than nonparticipants (Ji, et al., 2015).

- **Mental health conditions**: Among youth VR clients with mental health conditions, postsecondary education participants were more likely to be employed at case closure than nonparticipants (Honeycutt, et al., 2017).

- **Physical and sensory disabilities.** Among youth VR clients with physical and sensory disabilities, those who participated in postsecondary education had higher weekly earnings (O’Neill, et al., 2015) and were more likely to be employed at case closure (Alsaman & Lee, 2017) than those who did not participate in postsecondary education.

- **Visual impairments.** Among youth VR clients with visual impairments, postsecondary education participants were significantly more likely to be employed at 90 days after services ended (Giesen & Cavenaugh, 2012; Cimera, et al., 2015) and at two years after services ended (Berry & Caplan, 2010) than those who did not participate in postsecondary education. They also had significantly higher earnings after five years (Berry & Caplan, 2010).

**CONCLUSION:** Twelve out of 16 studies cited in this section concluded that youth VR clients who participated in postsecondary education were more likely to be employed after their VR services ended than youth VR clients who did not participate in postsecondary education. All of these studies are correlational, with the majority controlling for demographic information and receipt of other VR service components.

### 6.1.2 Vocational and Occupational Training

The evidence review found 10 studies that examined employment outcomes associated with vocational or occupational training in programs that would already be approved under Section 301, three of which regard youth with IEPs. A large longitudinal study reported that youth with emotional disturbances
enrolled in special education who completed four or more credits of occupationally specific career or technical education during high school were more likely to be employed at a two-year follow-up than those who had not (Wagner, et al., 2017). However, no differences were found at eight years. A study of youth with specific learning disabilities receiving special education (IEPs) found that those who enrolled in four or more career or technical education credits in high school were more likely to be employed six months after graduation than those who had completed three or fewer credits (Theobald, et al., 2019). A study of youth with disabilities and who receive welfare found that youth with vocational education or job training were more likely to be employed, though also have lower ages, than those who did not receive vocational education or job training (Enayati & Karpur, 2019).

Seven of the 10 studies provided evidence from youth VR clients regarding the impact of vocational or occupational training for youth enrolled in a program approved under Section 301. One of those seven that examined youth VR clients with various impairment types. Oswald (2016) found that youth VR clients who received occupational training were 1.86 times more likely to have employment at case closure than those without occupational training. The other studies examined the relationship between vocational training and employment outcomes for specific disability categories.

- **Autism spectrum disorder**: Four studies of youth VR clients reported on the association between vocational and occupational training and employment for individuals with autism spectrum disorder. In two of the studies, youth who participated in vocational or occupational training were 1.67 times (Kaya, et al., 2016) or 1.72 times (Chen, et al., 2015) more likely to be employed at VR closure than those who did not participate in such training. The other two reported no significant association between participating in vocational or occupational training and employment at case closure (Kaya, et al., 2018; Sung, et al., 2015).

- **Learning disabilities**: Ji, et al. (2015) reported that youth VR clients ages 15 to 18 years with learning disabilities who participated in vocational education were significantly more likely to be in competitive employment 90 days after services ended than those who did not participate in such education.

- **Visual impairments**: Cimera, et al. (2015) reported no differences in the proportion of transition-age youth VR recipients with visual impairments who were employed at 90 days after services ended depending on whether or not they participated in vocational or occupational training.

**CONCLUSION**: Receipt of vocational or occupational services for transition-age youth who received VR services was significantly associated with improved employment outcomes in five studies that compared the effectiveness of multiple VR interventions simultaneously. However, in four studies, receipt of vocational or occupational services was not statistically significantly associated with subsequent employment. None of the studies provided causal evidence, and all focused on youth VR recipients. These studies did not describe in detail the characteristics of vocational or occupational programs that made those programs successful.
6. Postsecondary Education in Community-Based Services Not Listed in Section 301

Transition-age youth with disabilities who participate in postsecondary education or vocational or occupational training may be eligible to take advantage of Section 301 provisions if they participate in those interventions while they have an IEP or an Individual Plan for Employment. Students enrolling in postsecondary education or vocational or occupational training without an individualized plan through an approved program are not currently eligible to take advantage of Section 301 provisions.

Postsecondary education and training is viewed as a pathway to competitive, integrated employment; higher-paying jobs; economic independence; and independent living (Grigal & Hart, 2010). Based on data from the second National Longitudinal Transition Study, Wehman, et al. (2015) reported that young adults with disabilities who had attended a four-year college or who had received vocational training were more likely to be employed at six years after high school than those who had attended a community college or had not participated in postsecondary education.

Individuals with autism, intellectual disorders, and other disabilities can succeed in appropriately structured postsecondary education environments. Effective models exist for teaching reading and math literacy skills (Browder, et al., 2008; Patton & Rochelle, 2008; Spooner, et al., 2012); social and communication skills (Agran, et al., 2002; Hughes, et al., 2011; Walton & Ingersoll, 2013); daily living skills (Bennett & Dukes, 2013; Cullen & Alber-Morgan, 2015); and self-advocacy and self-determination skills that support young people with disabilities in navigating the postsecondary education environment (Agran, et al., 2000; Palmer, et al., 2004; Wehmeyer, et al., 2013).

A recent literature review by Papay, et al. (2019) identifies three small studies that show favorable employment outcomes for students with intellectual disabilities who attended postsecondary education. A study of the Taft College Transition to Independent Living program reported on employment outcomes from a survey of 125 program graduates (Ross, et al., 2013). The program has served students with intellectual and developmental disabilities since 1995 and received a five-year Transition Programs for Students with Intellectual Disabilities (TPSID) grant from the U.S. Department of Education (see Section 2.3.1 for information about TPSID grants). Of the 125 graduates from the class of 2000 to 2010, 84 percent were employed for pay at the time of the survey in 2011. Another survey of 19 students with intellectual disabilities who had completed at least two semesters of college found that 7 (37 percent) were employed in the community (Butler, et al., 2016). This employment rate was higher than the rate (13 percent) for a random sample of 158 young adults ages 18-30 with intellectual disabilities in Kentucky. A third study found that 73 percent (n=11) of individuals with an intellectual disability who had graduated from an integrated postsecondary education program were employed at the time of the survey and 91 percent (n=23) of similar graduates of a specialized (classes are only for students with disabilities) postsecondary education program were employed (Moore & Schelling, 2015). These employment rates compare to 37 percent for a sample with intellectual disabilities from the National Longitudinal Transition Study-2 survey.

Compared to the number of studies of postsecondary education, we found fewer studies that estimated effects of vocational training for transition-age youth with disabilities. A cross-disability study of 308,573 youth in Massachusetts found that youth who attended a regional vocational or technical school were significantly more likely to have graduated from high school on time, and more likely to have earned an industry-recognized certificate than youth who did not attend (Dougherty, et al., 2018).
Federal legislation and advocacy support a conviction that all students should have the opportunity to participate in postsecondary education programs (Grigal & Hart, 2010; Lee & Will, 2010). For example, the Higher Education Act of 2008 provided new opportunities for students with intellectual disabilities to participate in college and university settings through a model demonstration program. One of its primary purposes is to provide academic, social, and career development services that lead to competitive, integrated employment for students with intellectual disabilities (U.S. Department of Education, 2019). The success of this model demonstration effort has been documented (Grigal, et al., 2016; Qian, et al., 2018), thus helping to raise the expectations of professionals, parents, and young people with disabilities on the benefits of postsecondary education.

Many initiatives provide access to postsecondary education and vocational or occupational training for students with disabilities, including students with intellectual or cognitive disabilities. The ThinkCollege website (https://thinkcollege.net/) lists 282 college programs for students with intellectual disabilities, and includes a vast array of resources to assist youth and families to explore potential postsecondary education options. Many of these college programs have been designated as a “comprehensive transition and postsecondary program” (CTP) by the U.S. Department of Education. The CTP designation allows students attending these programs to receive federal student financial aid. Students can enroll in comprehensive transition programs full-time after exiting high school or can dually enroll in those programs while attending high school (U.S. Department of Education, 2019). SSA might consider specifying in Section 301 that postsecondary education programs either be designated as a CTP or meet the CTP criteria.  

6.3 Postsecondary Summary

Some transition-age youth access postsecondary education, vocational training, and occupational training specifically through the VR program, but it is their participation in VR rather than their participation in postsecondary programs that would be approved under Section 301. Correlational studies support the hypothesis that postsecondary education, vocational training, and occupational training increase the likelihood of future employment.

The majority of correlational and quasi-experimental evidence demonstrates that postsecondary programs increase the likelihood of future employment. SSA might consider adopting the Department of Education’s CTP designation or criteria as the quality standard for inclusion of postsecondary programs in Section 301.

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14 A CTP program for students with intellectual disabilities means a degree, certificate, or nondegree program that

- Is offered by a college or career school and approved by the U.S. Department of Education;
- Is designed to support students with intellectual disabilities who want to continue academic, career, and independent living instruction to prepare for gainful employment;
- Offers academic advising and a structured curriculum; and
- Requires students with intellectual disabilities to participate, for at least half of the program, in
  - regular enrollment in credit-bearing courses with nondisabled students,
  - auditing or participating (with nondisabled students) in courses for which the student does not receive regular academic credit,
  - enrollment in noncredit-bearing, nondegree courses with nondisabled students, or
  - internships or work-based training with nondisabled individuals. (U.S. Department of Education, n.d.)
7. Conclusions and Recommendations

SSA asked Abt Associates and partners to synthesize available evidence on the effect of community-based services and supports for transition-age youth with disabilities. SSA also asked for recommendations regarding the role of community-based services in SSA’s SSI work incentives for transition-age youth.

This report answers the following research questions:

- What kinds of community-based supports and services are effective in improving employment, employment readiness, and related outcomes for youth with disabilities?
- Based on the available evidence, what policy changes to Section 301 could improve employment and related outcomes for transition-age youth receiving SSI?

For SSI youth to continue SSI eligibility under adult criteria past age 18, SSA makes a redetermination based on the youth’s ability to perform substantial gainful activity. The SSI program includes several work supports intended to encourage employment, such as the Student Earned Income Exclusion and plans for achieving self-support. Continued payments under Section 301 seek to encourage youth SSI recipients to develop job readiness skills and work attempts. Section 301 allows SSI benefits to continue after age-18 disability cessation decisions if a recipient is participating in a program that SSA determines is likely to lead to SGA.

SSA’s Program Operations Manual System (POMS) names five specific programs and services as appropriate programs for continuation of SSI benefits through Section 301, all of which are provided through local community organizations: (1) services specified in individualized education plans developed under approved policies and procedures under the Individuals with Disabilities Education Act (usually public schools providing special education programs), (2) services specified in an individualized work plan developed under the Ticket to Work and Self-Sufficiency Program, (3) services specified in an individualized plan for employment developed with a state VR agency, (4) services specified in an individualized plan for employment administered by a Vocational Rehabilitation Services Project for American Indians, and (5) services specified in a Plan to Achieve Self-Support.

An applicant may be approved for continuation of benefits under Section 301 for other transition and employment services not included in one of the five listed above. In fact, many community-based services we found may fit the definition of an appropriate program for Section 301, using the sixth type of appropriate program that SSA specifies in its policy. However, the definition of “VR services, employment services, or other support services” is open to interpretation, which creates some uncertainty about whether community-based supports and services not specifically named offer appropriate programs under Section 301. The sixth type of appropriate program that SSA provides is:

A program of VR services, employment services, or other support services carried out under a similar, individualized written employment plan with one of the following:

a. An agency of the federal government (e.g., SSA or the Department of Veterans Affairs), including a provider under an SSA demonstration project; such as PROMISE (Promoting the Readiness of Minors in Supplemental Security Income).
b. A one-stop delivery system or specialized one-stop center described in section 134(c) of the Workforce Investment Act of 1998; or

c. Another provider of services approved by SSA; providers we may approve include, but not limited to:

- A public or private organization with expertise in the delivery or coordination of VR services, employment services, or other support services; or

- A public, private or parochial school that provides or coordinates a program of VR services, employment services, or other support services carried out under an individualized program or plan, including a written service plan established under Section 504 of the Rehabilitation Act of 1973.

Among the community-based services identified in the evidence review that are not specifically named in Section 301, we are uncertain whether SSA designates them as appropriate programs for Section 301. In several cases we have not yet been able to verify whether the programs use individualized plans for employment to guide service provision, though several recruit participants who already have individualized plans through their local school district. We address this uncertainty directly by offering recommendations on the language of Section 301 (Section 7.2.1 of this report), as well as recommendations on the inclusion of additional community-based services (Section 7.2.2 of this report), and other recommendations (Section 7.2.3 of this report).

The balance of this chapter first summarizes the evidence presented in Chapters 4, 5, and 6 regarding the effectiveness of transition service components used in community-based services. Next, this chapter offers recommendations regarding the language and implementation of Section 301.

### 7.1 Evidence Synthesis

For programs both clearly and not clearly approved under Section 301, the evidence review found very little causal evidence of impacts on participants’ employment outcomes. Both the causal and correlational evidence generally provide information only about short-term employment outcomes (usually not more than two years after program completion). Some programs that are not clearly approved under Section 301 have evidence that is consistent with effectiveness. While this evidence is mostly correlational rather than causal, it is as strong as the evidence that supports the programs that are specifically named by Section 301.

Some caveats are important for interpreting the conclusions of this evidence synthesis. None of these program components were offered or evaluated in perfect isolation. Therefore, it is impossible to say whether one component (by itself) has a positive impact on employment outcomes for transition-age youth. It is difficult to tease apart the ways in which different program or service components or elements affect each other; therefore, a conclusion that there is not evidence to support a relationship or that the current evidence does not support a relationship could be due to limitations in the type of data available and the ways in which programming, services, and interventions are offered to this population.

Furthermore, a substantial proportion of the current evidence examined correlational relationships, which do not allow for any conclusions about causation. This means that while receipt of a certain program element may be associated with better employment outcomes, we cannot conclude that the intervention causes better employment outcomes. For example, it may be the case that certain types of individuals receive certain types of interventions and that those types of people are also more likely to find
7. CONCLUSIONS AND RECOMMENDATIONS

7.1.1 Work-Based Experiences (Chapter 4)

This report considered research evidence regarding five types of work-based experiences and services. The review found consistent correlational evidence but no causal evidence that, in isolation, job search assistance and job placement assistance are associated with improved employment outcomes for transition-age youth. In five of the seven descriptive, correlational studies about VR clients, receipt of job search assistance was positively correlated with youth employment (with all six accounting for participation in other VR activities). Similarly, with participation in other VR activities accounted for, all of the studies reported that youth receiving job placement assistance experienced improved employment outcomes.

The review found consistent correlational evidence but no causal evidence that, in isolation, on-the-job support services (a VR-specific name for services that help a person maintain employment) are associated with improved employment outcomes for transition-age youth.

We also found both causal and correlational evidence that supported employment improves the likelihood of obtaining competitive employment (Project SEARCH, Bridges from School to Work, VR) for transition-age youth. We found consistent evidence that the IPS model is associated with improved employment outcomes for people across the age spectrum, but there is less persuasive evidence regarding its effects on transition-age youth. The Employment Intervention Demonstration Program was effective for older participants, but there is no evidence that it was effective for transition-age youth.

We found mixed correlational evidence that on-the-job training, in isolation, is associated with improved employment outcomes for transition-age youth (based on VR client data). Offered in the context of a more comprehensive support program (i.e., Jobs for Youth), on-the-job training may have led to improved outcomes.

The review found both causal and correlational evidence that work experience improves the likelihood of obtaining competitive employment for transition-age youth (VR, PROMISE). Additional follow-up analysis of the PROMISE demonstration, which is still underway, will add to the body of evidence for programs whose primary focus includes work experience. Evidence also suggests that work-based experiences provided through Job Corps can improve employment rates and reduce later dependence on SSI and SSDI for transition-age youth with disabilities, although the research is dated.

7.1.2 Counseling and Self-Determination (Chapter 5)

This report considered research evidence regarding four types of counseling: benefits counseling, information and referral, case management, and vocational rehabilitation counseling (in general, not competitive employment (with or without the service). In some circumstances, however, the evidence does support a causal relationship. We have noted these within this document as utilizing a randomized control trial (RCT) design, which is an experimental method of evaluating the efficacy and effectiveness of interventions. This type of design does allow for conclusions about whether the intervention causes outcomes. Importantly, however, all of the interventions with RCT evidence are programs that involve multiple components and elements. While there may still be conclusions about certain elements or components (for example, by examining outcomes for participants within the program who did or did not use that part of the program), those conclusions about components are again about associations and not causation. We have chosen language carefully to indicate whether conclusions are about associations or causation.

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necessarily through state VR agencies). It also considered evidence regarding three types of training related to presenting oneself for work: job readiness training, self-advocacy training, and self-determination training.

The review found consistent correlational evidence that **benefits counseling** is associated with improved employment outcomes for transition-age youth (VR, PROMISE).

We found no conclusive evidence that **information and referral** services are associated with improved employment outcomes for transition-age youth (VR).

There is mixed correlational and quasi-experimental evidence regarding the association between **general vocational rehabilitation counseling** and employment outcomes for transition-age youth (VR).

There is mixed correlational evidence regarding a relationship between **job readiness interventions** and employment outcomes (VR).

There is some causal and correlational evidence that **self-advocacy interventions** are associated with improved employment outcomes for transition-age youth (evidence from various virtual reality job interview training programs and the Youth Transition Demonstration; general evidence from the second National Longitudinal Transition Study).

There is mixed correlational evidence that **self-determination interventions** are associated with improved employment outcomes for transition-age youth (PROMISE).

Often, several of these intervention components are offered simultaneously, and we found correlational evidence that blended counseling and related supports are associated with improved employment outcomes.

### 7.1.3 Postsecondary Education and Vocational Training (Chapter 6)

The review finds consistent correlational evidence that **postsecondary education** is associated with improved employment outcomes (including rates of competitive employment and weekly earnings). Though somewhat mixed, most evidence supports a positive relationship between **vocational training** and improved employment outcomes. The evidence, however, is all correlational.

Students enrolling in postsecondary education or vocational or occupational training without an individualized plan through an approved program are not currently eligible to take advantage of Section 301 provisions. The ThinkCollege website ([https://thinkcollege.net/](https://thinkcollege.net/)) lists 282 college programs for students with intellectual disabilities, and includes a vast array of resources to assist youth and families to explore potential postsecondary education options. The U.S. Department of Education has developed criteria to designate programs as “comprehensive transition and postsecondary programs” (CTPs). Students enrolled in CTPs are eligible to receive federal student financial aid.

### 7.2 Recommendations

We divide recommendations into three categories: (1) recommendations on the language and implementation of Section 301, (2) recommendations for the inclusion of additional types of community-based services to meet the definition of an appropriate program for Section 301, and (3) other recommendations. Recommendations on the language and implementation of Section 301 are based on the challenges inherent in determining whether community-based programs meet the definition of an appropriate program. Recommendations for the inclusion of additional types of community-based
services are based on the existence of consistent evidence of an association between a program and participants’ employment outcomes. Other recommendations are based on gaps in the current literature on community-based programs, services, and interventions for transition-age youth with disabilities. We also considered public commentary on Section 301 from SSA’s 2018 public request for information on strategies for improving the adult economic outcomes of youth ages 14 to 25 with disabilities receiving SSI (SSA-2017-0049). We include in this chapter only recommendations that can be supported directly by the findings of the evidence review. Appendix B presents responses from SSA’s public request for information that regard Section 301 policy but that are not directly supported by the findings of this evidence review.

7.2.1 Recommendations on the Language and Implementation of Section 301

A. **Consider adding language that defines the appropriateness of an individualized written employment plan.** The standard may simply be a description of the elements of a typical individualized work plan under the Ticket to Work program or a typical individualized plan for employment with a state VR agency, but it would make ODO expectations clearer to community-based programs drafting written, individualized plans for review in a Section 301 application. Specifically, we recommend that SSA consider having Section 301 refer and link to 34 CFR §361.46, which defines the mandatory components of an individualized plan for employment within the VR program. These are copied here:\(^\text{15}\)

1. A description of the specific employment outcome, as defined in §361.5(b)(16), that is chosen by the eligible individual and is consistent with the individual’s unique strengths, resources, priorities, concerns, abilities, capabilities, career interests, and informed choice.

2. A description of the specific rehabilitation services under §361.48 that are— (i) Needed to achieve the employment outcome, including, as appropriate, the provision of assistive technology devices, assistive technology services, and personal assistance services, including training in the management of those services; and (ii) Provided in the most integrated setting that is appropriate for the services involved and is consistent with the informed choice of the eligible individual;

3. Timelines for the achievement of the employment outcome and for the initiation of services;

4. A description of the entity or entities chosen by the eligible individual or, as appropriate, the individual’s representative that will provide the vocational rehabilitation services and the methods used to procure those services;

5. A description of the criteria that will be used to evaluate progress toward achievement of the employment outcome; and

6. The terms and conditions of the IPE, including, as appropriate, information describing— (i) The responsibilities of the designated State unit; (ii) The responsibilities of the eligible individual, including— (A) The responsibilities the individual will assume in relation to achieving the employment outcome; (B) If applicable, the extent of the individual’s

7. CONCLUSIONS AND RECOMMENDATIONS

participation in paying for the cost of services; and (C) The responsibility of the
individual with regard to applying for and securing comparable services and benefits as
described in §361.53; and (iii) The responsibilities of other entities as the result of
arrangements made pursuant to the comparable services or benefits requirements in
§361.53

B. Consider adding language that defines “employment services,” “other support services,”
and “vocational rehabilitation services” that will help ODO to consistently judge the
appropriateness of community-based programs. Community-based programs are dynamic, and
the program components they offer evolve. Many also face funding uncertainty. Hundreds of
programs operate, and while many adopt similar names for the program components they offer,
these names may not reflect uniform approaches. As a result, programs with the same name may
offer very different experiences to recipients (National Academies of Science, Engineering, and
Medicine, 2018). For this reason, additional language regarding the definitions of terms in the
sixth listed criterion for appropriateness will be helpful to ODO.

We recommend defining “employment services” as falling into two categories: pre-employment
and postemployment. The VR program (34 CFR §361.5.c.42) defines pre-employment services
that support individuals in maintaining employment and (34 CFR §361.5.c.41) postemployment
services.

Federal regulation also offers a suitable (though lengthy) definition of “other support services”
(34 CFR §361.5.c.37) that SSA could adopt or reference.

Finally, federal regulation defines vocational rehabilitation services as services that “assist the
individual with a disability in preparing for, securing, retaining, advancing in or regaining an
employment outcome that is consistent with the individual’s unique strengths, resources,
priorities, concerns, abilities, capabilities, interests, and informed choice” (34 CFR §361.48(b)).

The definition of these terms could include examples of programs that SSA regards as appropriate
(see Section 7.2.2).

C. Update the language in the sixth listed criterion for alignment to WIOA in place of the
Workforce Investment Act. Paragraph 6(b) shown in Exhibit 2-1 states that services at one-stop
centers under the Workforce Investment Act are appropriate. We recommend that SSA update
that language to “American Job Centers” in place of “one-stop centers” and WIOA in place of the
Workforce Investment Act.

7.2.2 Recommendations on the Inclusion of Additional Programs in Section 301

D. Consider explicit inclusion of programs that contain supported employment elements.
Supported employment is defined in 34 CFR §363.1(b) as follows: Competitive integrated
employment, including customized employment; or employment in an integrated work setting in
which an individual with a most significant disability is working on a short-term basis toward
competitive integrated employment; and employment that is individualized and customized,
consistent with the individual’s unique strengths, abilities, interests, and informed choice,
including with ongoing support services for individuals with the most significant disabilities.

There is considerable evidence that supported employment is related to better employment
outcomes. In particular, Individual Placement and Support, Bridges from School to Work,
and Project SEARCH have rigorous and robust evidence supporting the conclusion that participation in those programs causes better employment outcomes. Because these programs are not specifically named in the Section 301 policy, we are uncertain as to whether SSA designates them as appropriate programs for Section 301. Based on the evidence regarding these programs, however, we recommend that if the programs do in fact develop and follow individualized plans for employment for program participants, then SSA should consider explicitly including them as appropriate programs for Section 301, either in POMS or in guidance issued to staff reviewing 301 applications.

**Project SEARCH**: Project SEARCH is a collaboration between schools, local rehabilitation programs, state VR agencies, and host employers. The program provides supported employment through job coaching and unpaid internships. The Cincinnati Children’s Hospital Medical Center developed Project SEARCH in 1996, and the program is now offered at licensed sites in both the United States and other countries.

Programs using the Individual Placement and Support model: The IPS model is a standardized, evidence-based supported employment model for adults with psychiatric illness (Bond, et al., 2008). The IPS model is primarily a supported employment model that also incorporates integrated vocational and mental health treatment services, job search and job placement assistance, short-term benefits counseling, job search assistance within the first month of enrollment, and individualized follow-along services. If VR funds Individual Placement and Support services for a youth SSI recipient under an individual plan for employment, the individual would be eligible for Section 301. However, if the Individual Placement and Support services are funded through a grant from the Substance Abuse and Mental Health Services Administration, it is not clear whether the beneficiary would automatically be eligible for benefits continuation. In light of evidence available about the effects of the Individual Placement and Support model, and to promote consistency in Section 301 policy, we recommend that SSA name the Individual Placement and Support model explicitly as an approved program under Section 301, regardless of funding source.

**Recovery after an Initial Schizophrenia Episode (RAISE) Connection program**. RAISE emphasizes the educational and employment elements of the IPS model for people with first-episode psychosis. The National Institute of Mental Health instituted the program in 2008.

**Bridges from School to Work**. The program, developed by the Marriott Foundation, offers supported employment, along with vocational counseling, assessment, job placement, and job readiness training through nonprofit community agencies.

E. Consider explicit inclusion of programs that incorporate work-based experience or on-the-job supports as part of a comprehensive program of supports for possible inclusion in Section 301 policy. In studies of VR client data, these program components were often associated with improved employment outcomes. Several of the community-based program models using blended intervention strategies also included work-based experience or on-the-job support

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16 To implement this suggestion, SSA would require documentation from a program that it follows the IPS model. For this documentation, programs would provide fidelity assessments and fidelity scale, and SSA could set a benchmark fidelity score that is acceptable (out of the maximum score of 25). There is a validated a toolkit for assessing program fidelity to the IPS model: [https://ipsworks.org/index.php/product/fidelity-manual/](https://ipsworks.org/index.php/product/fidelity-manual/)
components. For example, Project SEARCH, PROMISE, Individual Placement and Support, and Bridges from School to Work (described above) reported improved employment outcomes for participants. Job Corps is another program for which there is evidence of improved employment outcomes. Job Corps is a DOL-administered residential program that provides work-focused supports for education, vocational training, medical exams, treatment and counseling for mental health and emotional problems, soft skills development (including social skills), job placement, and job retention supports to economically disadvantaged youth.

In lieu of providing a definition of work-based experiences, we recommend that ODO include programs with the following types of features in their list of appropriate work-based experience programs:

- A work experience where the youth is paid at or above minimum wage in an integrated setting, meaning that the youth has the opportunity to work with and interact with people both with and without disabilities.
- A registered apprenticeship program, as verified by inclusion in the Department of Labor’s registered apprenticeship program.

F. Consider explicit inclusion of postsecondary education, vocational training, occupational training, or career and technical education. There is consistent evidence that involvement in these types of programs is associated with better employment outcomes for transition-age youth; however, there is no causal evidence. SSA could use the Department of Education’s CTP designation or criteria as the quality standard for inclusion of postsecondary programs in Section 301.17 Postsecondary education typically does not start before age 18, and thus it would be difficult to gain continuation of SSI payments under the current requirement that participation in an appropriate program should begin at least one month prior to the disability cessation decision.

7.2.3 Other Recommendations

G. Support more robust and rigorous research and evaluation of community-based programs that support transition-age youth in obtaining competitive, integrated employment. Currently, there is a significant dearth of information regarding the efficacy and effectiveness of community-based programs for transition-age youth. The vast majority of the evidence identified in this review relies upon data from VR services. Many programs, even those described in Chapter 2 that are funded by federal agencies, have not yet been evaluated for their effect on the employment outcome of transition-age youth. Moreover, almost no studies provide information on long-term employment outcomes. Some example research questions are: (1) What services obtained using Medicaid home and community-based services waivers are associated with competitive, integrated employment? (2) How are programs offered through Centers for Independent Living associated with competitive, integrated employment? (3) Does service through an American Job Center improve employment outcomes for transition-age youth? (4) Does receipt of Section 504 plans improve future employment outcomes? (5) What are the long-term employment outcomes of programs for transition-age youth with impairments?

17 The Department of Education lists the 106 college programs that currently have a CTP designation: https://studentaid.gov/understand-aid/eligibility/requirements/intellectual-disabilities.
H. Consider further and more complex analysis of current data to allow for an understanding of specific components of blended interventions. As stated in Section 7.1 of this chapter, the intervention that individuals receive is often a combination of many different program components. Currently, there is not adequate understanding about which components are responsible for changes in outcomes, nor about how the different elements interact with one another to influence outcomes. Furthermore, there is not information regarding which program elements might be best for each individual. The use of advanced statistical methodologies (such as structural equation modeling) and the use of factorial design in experimental studies would allow for exploration of how specific components of blended interventions affect employment outcomes.

I. Consider making Section 301 participation data available to researchers to study its effect on employment outcomes. This evidence review did not find evidence one way or the other about the effect of Section 301 benefits continuation on the long-term employment outcomes for transition-age youth. We recommend making Section 301 data available for restricted use to researchers who could link Section 301 reasons for approval or denial with program participation data and earnings records to compare employment outcomes for transition-age youth who utilized Section 301 to similar youth who did not apply or were not granted continued benefits under Section 301.

J. Invite new studies of RSA-911 data that examine the outcomes of receipt of pre-employment transition services. As a result of WIOA, new variables have very recently been added to the VR Case Services Report data that will provide insight on the impact of pre-employment transition services for both in-school and out-of-school youth. In addition, new data elements on work-based learning, public support, initial IPE date, and IPE development extension are now included. Analysis of recent VR client data with these new variables could provide guidance for future changes to Section 301 policy.18

Section 301 is an important policy for assisting SSI youth as they transition to adulthood. Given the challenges SSI youth face during the transition, particularly those who do not meet the adult SSI eligibility requirements, it is prudent to examine Section 301 policy carefully to determine whether changes could improve outcomes. This report has identified some potential modifications for SSA to consider that could make the policy more explicit as to specific program components that are allowed, definitions of program components, and ways to continue to build the evidence base about how best to serve transition-age youth.

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18 Honeycutt, et al., (2019) present statistics describing receipt of pre-employment transition services, and variation across VR agencies in the type of client and mix of pre-employment transition service types offered to clients.
References


References


REFERENCES


Appendix A. Catalogue of Available Evidence Sources, by Program

Exhibit A-1 summarizes the findings reviewed in Chapter 4, 5, and 6 of this report regarding specific programs (Part I of the exhibit), the IPS model (Part II of the exhibit), and job interview training programs (Part III of the exhibit). The table is organized alphabetically by program name, and then alphabetically by author of research article. For each article, we indicate the program service components it evaluated and the type of participant studied. We note the generalizability of that article’s findings, the internal validity of the impact estimates, and a brief description of the estimated effect on employment-related outcomes. Exhibit A-2 summarizes the findings from articles that studied VR clients.

### Exhibit A-1. Catalogue of Available Evidence Sources, by Program

<table>
<thead>
<tr>
<th>Citation</th>
<th>Main Program Components</th>
<th>Study Participant Type</th>
<th>Generalizability</th>
<th>Internal Validity</th>
<th>Sample Size</th>
<th>Effect on Employment-Related Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part I. Specific Community-Based Services and Supports, or Demonstration</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Bridges from School to Work and Bridges Plus (Marriott Foundation)</td>
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</tr>
<tr>
<td>Fabian, 2007</td>
<td>Work experience - 1 semester Bridges program 1) vocational counseling - career counseling and job development - job placement; 2) paid work experience with training and support provided by an employer representative; and 3) follow-along support and tracking</td>
<td>16-22 year olds with various disabilities</td>
<td>Single state, multiple impairment types</td>
<td>Descriptive comparison to SSI youth not in the program</td>
<td>4,571</td>
<td>Bridges participants were more likely to be employed than non-Bridges participants who were SSI recipients.</td>
</tr>
<tr>
<td>Hemmeter, et al., 2015</td>
<td>Supported employment, job placement assistance</td>
<td>16-23 year old U.S. citizens with various disabilities, who live in urban settings, 90 percent racial/ethnic minorities</td>
<td>Multiple states, multiple impairment types</td>
<td>Descriptive comparison to SSI youth not in the program; no statistical hypothesis tests</td>
<td>Varies by follow-up period. To start, 10,007 Bridges participants at age 20 follow-up and 54,947 age-20 SSI comparison group.</td>
<td>The intervention was associated with higher earnings, a higher rate of employment above minimum wage, and a higher rate of employment with any amount of earnings. This association was found at up to 48 months, 121 months, and 180 months following the intervention.</td>
</tr>
<tr>
<td>Luecking &amp; Fabian, 2000</td>
<td>Supported employment, case management, job skills training, paid internships</td>
<td>High school students with intellectual disabilities, emotional disabilities, and learning disabilities</td>
<td>Multiple states, multiple impairment types</td>
<td>Descriptive study, no comparison group</td>
<td>3,024</td>
<td>At 6, 12, and 18 month follow-ups, 68, 53, and 60 percent were employed.</td>
</tr>
<tr>
<td>Citation</td>
<td>Main Program Components</td>
<td>Study Participant Type</td>
<td>General-izability</td>
<td>Internal Validity</td>
<td>Sample Size</td>
<td>Effect on Employment-Related Outcomes</td>
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</tr>
<tr>
<td>Burke-Miller, et al., 2012</td>
<td>Paid internship</td>
<td>Mental Illness</td>
<td>Multiple states, one impairment type</td>
<td>RCT</td>
<td>1,272</td>
<td>No evidence of effect on employment for youth age 18-24; positive effect on employment persons aged 25-30.</td>
</tr>
<tr>
<td>Job Corps</td>
<td>Work experience and on-the-job training</td>
<td>serious physical or emotional problem that limits work</td>
<td>Multiple states, multiple impairment types</td>
<td>Quasi-experimental design</td>
<td>472</td>
<td>Participants had higher earnings and lower SSI benefits than estimated counterfactual means.</td>
</tr>
<tr>
<td>Jobs for Youth</td>
<td>Training-occupational/vocational, Training/other, Case management/System Navigation, Family supports</td>
<td>learning/behavioral, intellectual, psychiatric, physical, other</td>
<td>Single metropolitan area, multiple impairment types</td>
<td>Descriptive study</td>
<td>116</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Maryland Seamless Transition Collaborative</td>
<td>Discovery, individualized work experiences, individual paid integrated employment, family supports, early VR case initiation, system linkages and collaboration</td>
<td>High school youth with autism spectrum disorder, serious mental illness, intellectual disability, specific learning disability, and other</td>
<td>Single state, multiple impairment types</td>
<td>Quasi-experimental</td>
<td>6,488</td>
<td>Program participants (N=377) had higher employment rate than other youth VR clients (N=6,111) (42 percent compared to 23 percent, respectively)</td>
</tr>
<tr>
<td>Project SEARCH</td>
<td>Supported employment, internship, job skills training</td>
<td>Various</td>
<td>Single site, multiple impairment types</td>
<td>Descriptive (no group or pre/post contrast)</td>
<td>10</td>
<td>60 percent had permanent, paid employment at the end of the program.</td>
</tr>
<tr>
<td>Muller &amp; VanGilder, 2014</td>
<td>Supported employment, job readiness training</td>
<td>Autism spectrum disorder</td>
<td>Single site, single impairment type</td>
<td>RCT with asymmetric attrition</td>
<td>40</td>
<td>Positive effect on competitive employment 1 year after enrollment in study.</td>
</tr>
<tr>
<td>Citation</td>
<td>Main Program Components</td>
<td>Study Participant Type</td>
<td>Generalizability</td>
<td>Internal Validity</td>
<td>Sample Size</td>
<td>Effect on Employment-Related Outcomes</td>
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</tr>
<tr>
<td>Wehman, et al., 2017</td>
<td>Supported employment (9 month training program including three internships) phases (job seeker profile, job development, job site training, long-term supports)</td>
<td>Autism spectrum disorder, age 18-21, capable of independent self-care</td>
<td>Single site, single impairment type</td>
<td>RCT with asymmetric attrition</td>
<td>54</td>
<td>Positive effect on employment and hours worked 1 year after intervention, but no evidence of effect on wages.</td>
</tr>
<tr>
<td>Wehman, et al., 2019</td>
<td>Supported employment, job readiness training</td>
<td>Autism spectrum disorder, age 18-21</td>
<td>Multi-state, single impairment type</td>
<td>RCT</td>
<td>156</td>
<td>Positive effect on employment, number of hours worked, and hourly wages.</td>
</tr>
</tbody>
</table>

**PROMISE**

<table>
<thead>
<tr>
<th>Citation</th>
<th>Main Program Components</th>
<th>Study Participant Type</th>
<th>Generalizability</th>
<th>Internal Validity</th>
<th>Sample Size</th>
<th>Effect on Employment-Related Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hartman, et al., 2019</td>
<td>Work-based experiences Individual and family supports Benefits counseling, assessment, job exploration counseling, job search experience counseling, family supports, self-advocacy training, financial training Various</td>
<td>PROMISE Wisconsin, age 14-16 at enrollment, SSI recipient at baseline</td>
<td>Single state, multiple impairment types</td>
<td>RCT; Correlational findings.</td>
<td>2,021 for RCT; varies for correlational studies</td>
<td>Causal evidence of a positive effect on employment. Correlational evidence that the following services are positively associated with employment outcomes: having school staff on a youth’s resource team, receipt of employment services, receipt of benefits counseling, receipt of financial coaching, receipt of family and self-advocacy training.</td>
</tr>
<tr>
<td>Ipsen, et al., 2019</td>
<td>face-to-face case management services (monthly), training (6 hrs/year/topic), benefits counseling, self-advocacy training, parent transition training, family financial literacy, flexible meeting times and places, crisis assistance</td>
<td>PROMISE ASPIRE site, age 14-16 at enrollment, SSI recipient at baseline</td>
<td>Single state, multiple impairment types</td>
<td>Study 1: RCT; Study 2: Quasi-experimental design</td>
<td>1,241</td>
<td>Study 1: No evidence of effect of random assignment to the treatment group on employment at 36 months after enrollment. Study 2: Youth with higher rates of face-to-face case-management and career exploration activities more likely to be employed at 36 months after enrollment.</td>
</tr>
<tr>
<td>Mamun, et al., 2019</td>
<td>work-based experience, benefits counseling, case management, self-determination training, financial literacy training</td>
<td>Age 14-16 at enrollment, SSI recipient at baseline</td>
<td>Multi-state, multiple impairment types</td>
<td>RCT</td>
<td>Varies by site, 1469 to 1691</td>
<td>Positive effect on employment in six out of six sites and positive effect on youth income in three out of six sites (18 month survey).</td>
</tr>
<tr>
<td>Schlegelmilch, et al., 2019</td>
<td>work-based experience, benefits counseling, case management, self-determination training, financial literacy training</td>
<td>Wisconsin PROMISE, age 14-16 at enrollment, SSI recipient at baseline</td>
<td>Single state, multiple impairment types</td>
<td>Correlational</td>
<td>1,011</td>
<td>Positive association between receipt of benefits counseling and employment and between receipt of benefits counseling and earnings.</td>
</tr>
<tr>
<td>Citation</td>
<td>Main Program Components</td>
<td>Study Participant Type</td>
<td>Generalizability</td>
<td>Internal Validity</td>
<td>Sample Size</td>
<td>Effect on Employment-Related Outcomes</td>
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<tr>
<td>Williams, et al., 2019</td>
<td>Job training (3 components), job experiences (2 components), Transportation</td>
<td>Arkansas PROMISE, age 14-16 at enrollment, SSI recipient at baseline</td>
<td>Single state, multiple impairment types</td>
<td>Correlational</td>
<td>126</td>
<td>Interest-based job placement, case management, and job readiness training positively associated with number of hours worked.</td>
</tr>
<tr>
<td><strong>Recovery After an Initial Schizophrenia Episode (RAISE)</strong></td>
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</tr>
<tr>
<td>Humensky, et al., 2017</td>
<td>Supported employment, IPS model, served youth in Maryland and New York from 2011 to 2013 (Repeated under “IPS” in Part II of this exhibit)</td>
<td>Mental illness, age 15-35</td>
<td>Multiple states, single impairment type</td>
<td>Descriptive study, no contrast group for employment outcome</td>
<td>65</td>
<td>Majority (78 percent) employed one year after program entry.</td>
</tr>
<tr>
<td><strong>START</strong></td>
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<tr>
<td>Langi, et al., 2017</td>
<td>Various career readiness training, job readiness skills training, job shadowing, independent living skills training, on-the-job training, work experience, on-the-job coaching</td>
<td>Various</td>
<td>Statewide, various impairments</td>
<td>Quasi-experimental design</td>
<td>4,422</td>
<td>Positive effect on employment at conclusion of intervention.</td>
</tr>
<tr>
<td><strong>Supported Employment and Supported Education for Emerging Adults</strong></td>
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</tr>
<tr>
<td>Ellison, et al., 2015</td>
<td>Supported employment, with peer mentoring and postsecondary education</td>
<td>Mental Illness</td>
<td>Single metropolitan area, single impairment type</td>
<td>No comparison group</td>
<td>35</td>
<td>No evidence about association or effect on employment.</td>
</tr>
<tr>
<td><strong>Youth Transition Demonstration</strong></td>
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</tr>
<tr>
<td>Croke &amp; Thompson, 2011</td>
<td>Person-centered care, self-advocacy training, benefits incentives/waivers, vocational rehabilitation counseling, occupational training, work experience, job search assistance, case management, parent support</td>
<td>Various impairment types, Bronx, age 14-19, SSI recipients</td>
<td>Single metropolitan area, multiple impairment types</td>
<td>Correlational study</td>
<td>403</td>
<td>Positive association between self-advocacy training and employment outcomes</td>
</tr>
<tr>
<td>Citation</td>
<td>Main Program Components</td>
<td>Study Participant Type</td>
<td>Generalizability</td>
<td>Internal Validity</td>
<td>Sample Size</td>
<td>Effect on Employment-Related Outcomes</td>
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</tr>
<tr>
<td>Fraker, et al., 2014</td>
<td>benefits incentives/waivers, vocational rehabilitation counseling, occupational training, work experience, job search assistance, case management, parent support</td>
<td>Various impairment types, age 14-25, SSI recipients</td>
<td>Multiple states, multiple impairment types</td>
<td>RCT</td>
<td>Varies by site, outcome, and year. Range is 595 - 789</td>
<td>Of the three sites with less rigorous programs, one had a positive impact on employment 36 months after the program began; there is no evidence of an impact at the other two sites. Of the three sites with more rigorous programs, one had a positive impact on employment and two had a positive impact on annual earnings 36 months after the program began.</td>
</tr>
<tr>
<td>Hemmeter, 2014</td>
<td>Benefits incentives/waivers, vocational rehabilitation counseling, occupational training, work experience, job search assistance, case management, parent support</td>
<td>Various impairment types, age 14-25, SSI recipients</td>
<td>Multiple states, multiple impairment types</td>
<td>RCT</td>
<td>Varies by site</td>
<td>Three out of the six sites had a positive impact on employment; there is no evidence of an impact at the other three sites. No evidence of an impact at any site on average earnings or the percentage whose earnings exceed SGA.</td>
</tr>
</tbody>
</table>

**Part II. Individual Placement and Support Model (IPS)**

<table>
<thead>
<tr>
<th>Citation</th>
<th>Main Program Components</th>
<th>Study Participant Type</th>
<th>Generalizability</th>
<th>Internal Validity</th>
<th>Sample Size</th>
<th>Effect on Employment-Related Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bond, et al., 2008</td>
<td>Supported employment and other characteristics of the IPS model</td>
<td>Various (Review article)</td>
<td>RCTs</td>
<td>Various (Review article)</td>
<td>All 11 studies reviewed for this article found that IPS significantly increased employment rates. Averaging across studies, majority (61 percent) obtained competitive employment compared to 23 percent in control groups</td>
<td></td>
</tr>
<tr>
<td>Ferguson, et al., 2012</td>
<td>Supported employment, Characteristics of the IPS model include 1) no eligible youth are excluded; 2) vocational and mental health treatment staff met weekly; 3) job search assistance; 4 personalized benefit planning; 5) Job search that begins within 1 month; 6) individualized follow-up supports; and 7) client preferences influence the job sought and nature and type of support provided. Mental health services included cognitive behavioral therapy, medication referral, motivational interviewing, and harm-reduction strategies.</td>
<td>Mental illness, age 18-24, homeless youth</td>
<td>Single metro area, single impairment type</td>
<td>Pre-post study with comparison group, comparison group served by different agency</td>
<td>36</td>
<td>Positive association between intervention receipt and employment at follow-up and employment during the study period.</td>
</tr>
</tbody>
</table>
### Citation | Main Program Components | Study Participant Type | Generalizability | Internal Validity | Sample Size | Effect on Employment-Related Outcomes
---|---|---|---|---|---|---
Humensky, et al., 2017 | Supported employment, IPS model, served youth in Maryland and New York from 2011 to 2013 (Repeated under “RAISE” program, in Part I of this exhibit) | Mental illness, age 15-35 | Multiple states, single impairment type | Descriptive study, no contrast group for employment outcome | 65 | Majority (78 percent) employed one year after program entry.

Noel, et al., 2018 | Job placement, IPS model as implemented in 10 programs across Illinois | 16-24 year olds with developmental and mental disabilities | Statewide, multiple impairment types | Pre/post study | 109 | Proportion of participants employed increased from 12 percent to 36 programs.

### Part III. Job Interview Training

<table>
<thead>
<tr>
<th>Citation</th>
<th>Main Program Components</th>
<th>Study Participant Type</th>
<th>Generalizability</th>
<th>Internal Validity</th>
<th>Sample Size</th>
<th>Effect on Employment-Related Outcomes</th>
</tr>
</thead>
</table>
Hayes, et al., 2015 | VidCoach | Autism spectrum disorder, age 17-18 | Single metro area, single impairment type | RCT | 15 | Positive impact on job interview performance

Rosales & Whitlow, 2019 | Training - job interview Mock interviews, Interview Stream, Behavioral skills training | Autism spectrum disorder, age 12-27 | Single metro area, single impairment type | Pre-post study | 6 | Intervention associated with positive improvement in job interview performance

Smith, et al., 2015 | Virtual Reality Job Interview Training | Autism spectrum disorder, age 18-31 | Single metro area, single impairment type | RCT | 23 | Positive impact on receipt and acceptance of job offer

Strickland, et al., 2013 | JobTIPS (web-based multimedia employment training program) | Autism spectrum disorder, pervasive developmental disorder | Single metro area, single impairment type | RCT | 22 | Positive impact on job interview performance
### Exhibit A-2: Catalogue of Available Evidence Sources for State Vocational Rehabilitation, by Service Type

<table>
<thead>
<tr>
<th>Citation</th>
<th>Study Participant Type</th>
<th>Sample Size</th>
<th>Effect on Employment-Related Outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Job Search Assistance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chen, et al., 2015</td>
<td>Autism spectrum disorder, case closed 2011, age 18-25, received VR based on their IEP, not employed when applied for VR service</td>
<td>5,681</td>
<td>No statistically significant association with employment</td>
</tr>
<tr>
<td>Cimera, et al., 2015</td>
<td>Visual impairments, case closed 2011, age 16-25</td>
<td>2,543</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Glynn &amp; Schaller 2016</td>
<td>ADHD, case closed 2012, age 16-24, White, Hispanic, or African American; signed an IEP and received VR services</td>
<td>9,919</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Kaya, et al., 2016</td>
<td>Autism spectrum disorder, case closed 2011, age 16-25, not employed when applied for VR service</td>
<td>4,322</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Kaya, et al., 2018</td>
<td>Autism spectrum disorder, case closed 2013, age 19-25, not employed when applied for VR service, received at least one service</td>
<td>3,243</td>
<td>No statistically significant association with employment</td>
</tr>
<tr>
<td>Migliore, et al., 2012</td>
<td>Autism spectrum disorder, age 16-26, case closed 2010, not employed when applied for VR service</td>
<td>6,952</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Sung, et al., 2015</td>
<td>Autism spectrum disorder, age 16-25, case closed 2011, received VR services</td>
<td>5,344</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td><strong>Job Placement Assistance</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alsaman &amp; Lee, 2017</td>
<td>Various impairments, case closed 2013, age 16-25, received services in nonblind VR program in any of 50 states and DC, had records with no missing data</td>
<td>122,703</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Chen, et al., 2015</td>
<td>Autism spectrum disorder, case closed 2011, age 18-25, received VR based on their IEP, not employed when applied for VR service</td>
<td>5,681</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Cimera, et al., 2015</td>
<td>Visual impairments, case closed 2011, age 16-25</td>
<td>2,543</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Giesen &amp; Cavenaugh, 2012</td>
<td>Visual impairments, case closed 2010, age 21 and younger, received VR service</td>
<td>2,282</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Glynn &amp; Schaller 2016</td>
<td>ADHD, case closed 2012, age 16-24, White, Hispanic, or African American; signed an IEP and received VR services</td>
<td>9,919</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Kaya, 2018</td>
<td>Intellectual disabilities, case closed 2013, age 19-25, not employed when applied for VR service, received at least one VR service</td>
<td>8,320</td>
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<td>3,243</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Ji, et al., 2015</td>
<td>Learning disabilities, case closed 2012, age 15-18,</td>
<td>25,218</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Migliore, et al., 2012</td>
<td>Autism spectrum disorder, age 16-26, case closed 2010, not employed when applied for VR service</td>
<td>6,952</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Oswald, 2016</td>
<td>Various impairments, case closed 2006, referred to VR prior to age 22, developed an IEP and received at least one VR service</td>
<td>3,215</td>
<td>Positive association with employment</td>
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<tr>
<td><strong>On-the-Job Supports</strong></td>
<td></td>
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<tr>
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<td>Autism spectrum disorder, case closed 2011, age 18-25, received VR based on their IEP, not employed when applied for VR service</td>
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<td><strong>Supported Employment</strong></td>
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<tr>
<td>Chan &amp; Kregel, 2019</td>
<td>Intellectual disability, autism, schizophrenia, case closed 2010-2013</td>
<td>182,719</td>
<td>Positive association with employment (quasi-experimental study using propensity scores)</td>
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<tr>
<td><strong>On-the-Job Training</strong></td>
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<td>Negative association with employment for young adults age 19 to 25; no statistically significant association with employment for youth age 14 to 18.</td>
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<tr>
<td><strong>Postsecondary Education</strong></td>
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<tr>
<td>Alsaman &amp; Lee, 2017</td>
<td>Various impairments, case closed 2013, age 16-25, received services in nonblind VR program in any of 50 states and DC, had records with no missing data</td>
<td>122,703</td>
<td>Positive association with employment</td>
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<tr>
<td>Berry &amp; Caplan, 2010</td>
<td>Various impairments, case closed 2001, age 16-25, self-reported earnings 2001, receipt of SSI in 2001</td>
<td>3,046</td>
<td>Positive association with earnings 2 and 5 years after case closure, but negative association with employment and 5 years after case closure For persons with visual impairments, positive association with employment 2 and 5 years after case closure</td>
</tr>
<tr>
<td>Chen, et al., 2015</td>
<td>Autism spectrum disorder, case closed 2011, age 18-25, received VR based on their IEP, not employed when applied for VR service, no secondary impairment, had an IPE, had a goal of supported employment</td>
<td>5,681</td>
<td>No statistically significant association with employment</td>
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<tr>
<td>Cimera, et al., 2018</td>
<td>Intellectual disability, case closed 2015, age 17-26</td>
<td>9,432</td>
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</tr>
<tr>
<td>O’Neill, et al., 2015</td>
<td>Case closed 2011, age 16-25 (older adults included and estimated separately)</td>
<td>178,290</td>
<td>(1) Positive association with employment</td>
</tr>
<tr>
<td></td>
<td>(1) Intellectual disability</td>
<td></td>
<td>(2) Positive association with employment</td>
</tr>
<tr>
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<td>3,215</td>
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</tr>
<tr>
<td>Rast, et al., 2019</td>
<td>Autism spectrum disorder, case closed 2015, age 14-24, received VR service</td>
<td>12,073</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Sannicandro, et al., 2018</td>
<td>Intellectual disability, case closed 2008-2013, age 16-30, lived in 50 states or D.C., received VR service</td>
<td>11,280</td>
<td>Positive association with employment</td>
</tr>
<tr>
<td>Sung, et al., 2015</td>
<td>Autism spectrum disorder, age 16-25, case closed 2011, received VR services</td>
<td>5,344</td>
<td>No statistically significant association with employment</td>
</tr>
</tbody>
</table>

**Vocational and Occupational Training**

<table>
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Note: This exhibit catalogues the evidence of associations between specific VR service components and employment outcomes. Unless otherwise noted, these studies employed nationally representative data and studied employment outcomes at time of case closure. “Positive[negative] association with employment” indicates that the estimated associations were statistically significant. These studies generate correlational evidence by comparing youth VR client who received a specific service to youth VR clients who did not receive that service, almost always controlling for demographic variables and receipt of other VR services.
Appendix B. Excerpts of Recommendations and Suggestions for Section 301 from Public Request For Information: SSA-2017-0049

In January 2018, SSA issued a public Request for Information on Strategies to Improve Adult Outcomes for Youth Receiving Supplemental Social Security (Docket Number SSA-2017-0049, Document Number 2017-28397). The 196 responses are available online as 196 separate documents. This appendix displays excerpts of the 17 RFI comments we found that pertain to Section 301 policy. All of the excerpts below are direct quotations of the RFI responders and do not constitute recommendations based on the evidence review of this report.

We present the excerpts in alphabetical order by the organization/author name. Six organizations submitted very similar text about Section 301. Those organizations are Community Legal Aid Society Inc., Community Legal Services of Philadelphia, the Consortium for Citizens with Disabilities, Disability Rights Pennsylvania, the Juvenile Law Center, and the National Coalition of Social Security and Supplemental Security Income Advocates.

Eastern Shore Business Leadership Network (Ticket to Work Employment Network)

Refresh local SSA offices’ existing staff on work incentives. …We found we were sometimes refreshing the local offices training on SEIE, Section 301, and Ticket to Work.

California Department of Rehabilitation

The SSA WIPA program currently provides WIPA projects and WIPA Community Work Incentives Coordinators little training specific to SSI youth. We recommend that SSA and the Virginia Commonwealth University WIPA National Training Center develop and provide WIPA projects more training and resources on the following topics to increase youth engagement in work: child SSI benefits and the age-18 redetermination process, Section 301, SEIE, deeming for children receiving SSI, financial literacy, state specific benefits, other policies and programs specific to SSI youth, person-centric and family-centric planning and outreach for youth that also engages their families.…

Educate schools, families, VR and other service providers about the age-18 redetermination (at age 18 SSA reviews eligibility for continued SSI benefits based on the disability rules for adults) and Section 301, promote that employment at any level, even Substantial Gainful Activity (SGA) level, will not affect the age-18 redetermination.…

If Ticket is expanded to include children or a separate program is created, the program should be included in SSA policy for Section 301.…

Under Section 301, beneficiaries who are participating in an approved employment plan can continue to receive disability benefits even if Social Security determines that they no longer have a disability during an age-18 redetermination. There should be Section 301 protection for SSI youth while actively participating in the Ticket program and making progress in deliverables.

SSA should also consider the following revisions to their policies:

a) Raise the age of the SSI redetermination for child SSI beneficiaries to 25 years old. This would allow individuals to naturally progress off of benefits as their earning potential increases with age.
b) Make youth SSI Ticket participants exempt from age-18 redetermination while participating and making timely progress.

c) Develop materials to demonstrate Section 301 protections for SSI youth and its relationship to improved self-sufficiency. Charge SSA staff with promoting the use of the Section 301 in conjunction with training and employment.

…Develop materials to demonstrate Section 301 protections for SSI youth and its relationship to improved self-sufficiency. Charge SSA staff with promoting the use of the Section 301 in conjunction with training and employment.

*Commonwealth of Virginia Department for Aging and Rehabilitative Services*

We also recommend that SSA extend Section 301 payment protections to youth Ticketholders served by VR agencies that allow for “handoffs” to Partnership Plus employment networks (ENs) providing ongoing support services. Such a change in SSA regulations would seamlessly create long term supports, and would likely increase the willingness of ENs to work with SSI youth who need ongoing supports as they transition from school to work.

*Community Legal Aid Society, Inc.*

Section 301 has enormous potential to encourage youth participation in education and vocational rehabilitation (VR) programs, but it is sorely underutilized, particularly in light of the vast numbers of youth who have IEPs and participate in VR programs. Section 301 provides the critical financial resources and eligibility for health insurance that youth rely on for transportation, medical treatment, and basic necessities to support their ongoing participation in education and VR training. However, the policy is complex, not widely understood, and some provisions conflict with VR policies to make youth ineligible. The extremely low rate of benefits paid under Section 301 signals a need for immediate changes, as explained below, to bring Section 301 in line with its stated goal of supporting youth in accessing programs that will reduce reliance on benefits in the future. We recommend a number of changes to simplify Section 301 and make it more compatible with VR and education policies.

- **Establish information and data sharing with VR and education programs.** We recommend that SSA explore data-sharing agreements that would allow VR agencies to recruit youth SSI recipients for services. Youth are already generally eligible for VR services before age 18, and the Workforce Innovation and Opportunity Act (WIOA) requires VR agencies to increase their services to youth. Data sharing would help VR agencies find youth who need their services while simultaneously connecting youth to programs necessary to maintain eligibility for benefits under Section 301. We also recommend that SSA contact the Department of Education's Office of Special Education Programs to offer Section 301 information to Parent Centers and other groups to ensure youth and their families are aware that enrollment in VR services may impact their eligibility to receive continuing benefits under Section 301.

- **Modify the requirement to begin participating in a qualifying VR or similar program before disability benefits cease.** We recommend changing the requirement that a youth begin participating in a VR or similar program before disability ceases, as currently outlined in 20 C.F.R. § 416.1338, 20 C.F.R. § 404.1586, and related regulations. We suggest changing this rule to require youth to begin participating in a VR or similar program within the two-month grace period after benefits cease. Although SSA has taken commendable steps to inform youth of their rights prior to the age-18 redetermination process, many youth remain unaware of VR
programs and Section 301. We suggest that SSA include information about Section 301 in disability cessation notices and provide youth an additional two months to join a qualifying program.

- **Modify the definition of "participating" in recognition of unavoidable delays youth face as they transition between education and VR programs.** We propose that SSA change its regulations at 20 C.F.R. § 416.1338 and 20 C.F.R. § 404.327 to modify the definition of "participating" in a program. To be eligible for continuing benefits under Section 301, a youth must be participating in a qualifying VR or similar program. Youth may remain eligible under Section 301 when there is a temporary interruption in program participation that lasts three months or less, for example, if they transition from special education services in school to a VR program within three months. The current definition of "participating" requires that youth have a written employment or education plan in place, and that youth are engaged in the activities outlined in that plan. However, it often takes longer than three months to develop a written plan, particularly in the VR context. A VR office has up to 150 days, i.e. 5 months, from the initial application to develop an Individualized Plan for Employment (IPE)—60 days to make an eligibility determination and 90 days to develop the IPE (34 C.F.R. §§ 361.42, 361.45). Even if a youth applies for VR services the day before graduating high school, they would most likely not have an IPE within three months of leaving school, and would never be able to satisfy the requirement to begin participating in a new program within three months. Furthermore, many VR offices take longer than 150 days to develop a plan because they need additional evaluations or cannot meet demand. (For example, in Pennsylvania in FY2014, 52% of cases exceeded the 60-day statutory time limit to make an eligibility determination, and 18% of cases exceeded the 90-day statutory time limit to develop an IPE.) As a result, even youth who apply for VR months before graduation may be denied continuing SSI benefits based on VR delays. Youth who make a good faith effort to access VR or similar programs should not be prejudiced for delays in processing their application for services. We suggest that SSA broaden its definition of "participating" to include filing an application with a qualified program, participating in an eligibility determination with a qualified program, and creating a written employment plan with a qualifying program. Changing the definition of "participating" to encompass the necessary and time-consuming steps that predate the written employment plan will avoid penalizing youth for delays they did not cause, and will make Section 301 more consistent with VR policy and practice.

- **Simplify the method of verifying participation in a qualifying VR or similar program.** We recommend changing SSA's policies to verify participation in a qualifying VR or similar program in POMS DI 14510.015, DI 14510.020, and related sections. Currently, to establish eligibility for benefits under Section 301, SSA sends SSA Form 4290-F5 to the VR or similar program where the youth is enrolled to confirm participation. However, when the form is not completed and returned, youth are unable to use a different means to prove they are participating in the program, leading to unnecessary and prejudicial delays. We recommend that SSA make SSA Form 4290-F5 one of several methods that may be used to show the youth is participating in a VR or similar program. We suggest that SSA primarily use data sharing to confirm youth participation in an appropriate program. In many states, DDS and VR are part of the same state agency, including in Delaware where they are both part of the Department of Labor, which should facilitate information sharing. Alternatively, we recommend that SSA accept an IPE or other written employment plan as evidence that a youth is participating in an appropriate program.
• **Publicize and evaluate data regarding Section 301.** Stunningly, it is our understanding that SSA maintains no searchable or aggregate data regarding the number of youth, or claimants more generally, who receiving continuing benefits under Section 301. We suggest that SSA develop a mechanism to track the number of youth who are considered for benefits under Section 30, the number of youth approved for benefits under Section 301, and the number of youth denied benefits under Section 301, along with the reason for that denial. Without data about the Section 301 process, it is difficult to determine how effective it is or how it could be improved in light of current transition practices for youth.

• **Conduct additional training within SSA with service providers and about Section 301.** We suggest that SSA develop and conduct extensive training about Section 301 both within and outside of SSA. In some cases, SSA staff are unaware of the correct eligibility criteria under Section 301 and do not flag a claim as potentially eligible. In other cases, after a disability appeal is lost, SSA does not follow up on potential Section 301 eligibility to reduce overpayments caused by benefit continuation. Misunderstandings about Section 301 have a direct negative impact on youth, and we recommend that SSA conduct additional trainings with its staff to clarify correct policies and procedures. We also recommend that SSA develop external training on Section 301 to share with the Department of Education, VR agencies, and other service providers to help them inform youth of their right to continuing benefits under this policy.

*Community Legal Services of Philadelphia*

Section 301 has enormous potential to encourage youth participation in education and vocational rehabilitation (VR) programs, but it is sorely underutilized, particularly in light of the vast numbers of youth who have IEPs and participate in VR programs. Section 301 provides the critical financial resources and eligibility for health insurance that youth rely on for transportation, medical treatment, and basic necessities to support their ongoing participation in education and VR training. However, the policy is complex, not widely understood, and some provisions conflict with VR policies to make youth ineligible. The extremely low rate of benefits paid under Section 301 signals a need for immediate changes, as explained below, to bring Section 301 in line with its stated goal of supporting youth in accessing programs that will reduce reliance on benefits in the future. We recommend a number of changes to simplify Section 301 and make it more compatible with VR and education policies.

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*Consortium of Citizens with Disabilities (Excerpt)*

…SSA could improve its work incentives by simplifying and improving implementation of Section 301 of the Rehabilitation Act. Section 301 has enormous potential to encourage youth participation in education and vocational rehabilitation (VR) programs. Section 301 provides the critical financial resources and eligibility for health insurance that youth rely on for transportation, medical treatment, and basic necessities to support their ongoing participation in education and VR training. However, the policy is complex, not widely understood, and some provisions conflict with VR policies. We recommend a number of changes to simplify Section 301 and make it more compatible with VR and education policies.

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_Disability Rights Pennsylvania_

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**Galvez, Aylen (Individual)**

As part of my job, I've accompanied families/students to SSA offices for support and assist families in better understanding SSI benefits, work incentives, etc., and have encountered SSA reps that have no clue about work incentives, and section 301... My last recommendation to improve current services is to increase availability of information and publications in Spanish. Many Spanish speaking families are not able to understand information in English, and certainly a percentage of SSI recipients' first language is Spanish. This affects, in a way, the extent to which the consumer can make an informed choice related to their own economic outcomes.

**Homeless Advocacy Project**

Section 301 has enormous potential to encourage youth participation in education and vocational rehabilitation (VR) programs. Section 301 provides the critical financial resources and eligibility for health insurance that youth rely on for transportation, medical treatment, and basic necessities to support their ongoing participation in education and VR training. However, the policy is complex, not widely understood, and some provisions conflict with VR policies. We recommend the following change to simplify Section 301 and make it more compatible with VR and education policies.
Modify the requirement to begin participating in a qualifying VR or similar program before disability benefits cease. We recommend changing the requirement that a youth begin participating in a VR or similar program before disability ceases, as currently outlined in 20 C.F.R. § 416.1338, 20 C.F.R. § 404.1586, and related regulations. We suggest changing this rule to require youth to begin participating in a VR or similar program within the two-month grace period after benefits cease. Although SSA has taken commendable steps to inform youth of their rights prior to the age-18 redetermination process, many youth remain unaware of VR programs and Section 301. We suggest that SSA include information about Section 301 in disability cessation notices and provide youth an additional two months to join a qualifying program.

Institute for Community Inclusion, University of Massachusetts Boston

Some changes to Section 301 can impact how youth use SSI. Primarily though better information on, or changes to this section. Recipients and the people around them have to know that Section 301 exists and how to make it work. Better yet, one recommended change we feel is important is to not require that someone be denied eligibility for the medical reasons if they submit the Forms for Section 301 at CDR or Redetermination, as happens now (at CDR or Redetermination must be denied first, and on appeal use the Section 301 work incentive).

Juvenile Law Center

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*Maine Medical Center (Excerpt)*

Provide mail and/or online information about Section 301 payments to promote making early decisions about work.
Maryland Department of Disabilities
If you are eligible for SSI, you are eligible for DORS [Maryland Division of Rehabilitation Services] services under Order of Selection and DORS can issue 301 plans. AJCs [American Job Centers], given their emphasis on Out of School Youth, should be able and required to develop and approve 301 plans.

Make modifications to 301—if not found eligible for age 18, allow youth the option to develop a 301 plan, developed by AJC, or VR, that links continued funding to engagement in post school training that results in work and rewards. It should not have to be done through an EN model, which is too cumbersome to make it a useful tool.

Having 301 as an option for those not eligible at age 18 to retain their SSI until age 21 or achievement of a living wage for at least one year, as long as they remain active and engaged and demonstrating progress in skills training, financial education and employment, as referenced previously.

Maximus Federal
SSA could also consider making incentive payments to service providers if the youth/young adult actually uses Work Incentives like 301, PASS, IRWE and the Student Earned Income Exclusion.

Under a WIPA/Ticket type demonstration program developed to include youth, benefits counseling and financial capability services could begin at age 14. Then at age 18, a Ticket or “Ticket like” assignment would automatically qualify them for 301 status, with protection from age 18 redetermination, to continue on SSI benefits. The Ticket program currently protects beneficiaries with assigned Tickets from medical Continuing Disability Reviews (CDR) if they are making “Timely Progress.” A similar system could be adapted to protect youth on SSI from age 18 redeterminations.

National Association of Benefits and Work Incentives Specialists
SSA should develop strategies to more aggressively market transition-age work incentives and related services to students in school settings. Examples:

- Student Earned Income Exclusion,
- Section 301 protections,
- Work Incentives Counseling

…Expand Section 301 protections to SSI youth under 18 by making the IEP an allowable program.

SSA should conduct regular outreach to youth SSI recipients on the Work Incentives available for transition-age youth (SEIE, 301, PASS) and the availability of Vocational Rehabilitation.

National Coalition of Social Security and Supplemental Security Income Advocates (Excerpt)
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on benefits in the future. We recommend a number of changes to simplify Section 301 and make it more compatible with VR and education policies.

- Establish information and data sharing with VR and education programs. We recommend that SSA explore data-sharing agreements that would allow VR agencies to recruit youth SSI recipients for services. Youth are already generally eligible for VR services before age 18, and the Workforce Innovation and Opportunity Act (WIOA) requires VR agencies to increase their services to youth. Data sharing would help VR agencies find youth who need their services while simultaneously connecting youth to programs necessary to maintain eligibility for benefits under Section 301. We also recommend that SSA contact the Department of Education’s Office of Special Education Programs to offer Section 301 information to Parent Centers and other groups to ensure youth and their families are aware that enrollment in VR services may impact their eligibility to receive continuing benefits under Section 301.

- Modify the requirement to begin participating in a qualifying VR or similar program before disability benefits cease. We recommend changing the requirement that a youth begin participating in a VR or similar program before disability ceases, as currently outlined in 20 C.F.R. § 416.1338, 20 C.F.R. § 404.1586, and related regulations. We suggest changing this rule to require youth to begin participating in a VR or similar program within the two-month grace period after benefits cease. Although SSA has taken commendable steps to inform youth of their rights prior to the age-18 redetermination process, many youth remain unaware of VR programs and Section 301. We suggest that SSA include information about Section 301 in disability cessation notices and provide youth an additional two months to join a qualifying program.

- Modify the definition of “participating” in recognition of unavoidable delays youth face as they transition between education and VR programs. We propose that SSA change its regulations at 20 C.F.R. § 416.1338 and 20 C.F.R. § 404.327 to modify the definition of “participating” in a program. To be eligible for continuing benefits under Section 301, a youth must be participating in a qualifying VR or similar program. Youth may remain eligible under Section 301 when there is a temporary interruption in program participation that lasts three months or less, for example, if they transition from special education services in school to a VR program within three months. The current definition of “participating” requires that youth have a written employment or education plan in place, and that youth are engaged in the activities outlined in that plan. However, it often takes longer than three months to develop a written plan, particularly in the VR context. A VR office has up to 150 days, i.e. 5 months, from the initial application to develop an Individualized Plan for Employment (IPE)—60 days to make an eligibility determination and 90 days to develop the IPE. 34 C.F.R. §§ 361.42, 361.45. Even if a youth applies for VR services the day before graduating high school, they would most likely not have an IPE within three months of leaving school, and would never be able to satisfy the requirement to begin participating in a new program within three months. Furthermore, many VR offices take longer than 150 days to develop a plan because they need additional evaluations or cannot meet demand. As a result, even youth who apply for VR months before graduation may be denied benefits based on VR delays. Youth who make a good faith effort to access VR or similar programs should not be prejudiced for delays in processing their application for services. We suggest that SSA modify its definition of “participating” in a qualifying program to make Section 301 more consistent with VR policy and practice. We suggest that SSA broaden its definition of “participating” to include filing an application with a qualified program, participating in an eligibility determination with a qualified program, and pursuing other activities consistent with the individualized plan.
program, and creating a written employment plan with a qualifying program. Changing the
definition of “participating” to encompass the necessary and time-consuming steps that predate
the written employment plan will avoid penalizing youth for delays they did not cause, and will
make Section 301 more consistent with VR policy and practice.

- Simplify the method of verifying participation in a qualifying VR or similar program. We
  recommend changing SSA’s policies to verify participation in a qualifying VR or similar program
in POMS DI 14510.015, DI 14510.020, and related sections. Currently, to establish eligibility for
benefits under Section 301, SSA sends SSA Form 4290-F5 to the VR or similar program where
the youth is enrolled to confirm participation. However, when the form is not completed and
returned, youth are unable to use a different means to prove they are participating in the program,
leading to unnecessary and prejudicial delays. We recommend that SSA make SSA Form 4290-
F5 one of several methods that may be used to show the youth is participating in a VR or similar
program. We suggest that SSA primarily use data sharing to confirm youth participation in an
appropriate program. In many states, DDS and VR are part of the same state agency, which
should facilitate information sharing. Alternatively, we recommend that SSA accept an IPE or
other written employment plan as evidence that a youth is participating in an appropriate
program.

- Publicize and evaluate data regarding Section 301. There is currently no data available regarding
the number of youth, or claimants more generally, who receiving continuing benefits under
Section 301. We suggest that SSA develop a mechanism to track the number of youth who are
considered for benefits under Section 301, the number of youth approved for benefits under
Section 301, and the number of youth denied benefits under Section 301, along with the reason
for that denial. Without data about the Section 301 process, it is difficult to determine how
effective it is or how it could be improved in light of current transition practices for youth.

- Conduct additional training within SSA with service providers and about Section 301. We
  suggest that SSA develop and conduct extensive training about Section 301 both within and
outside of SSA. In some cases, SSA staff are unaware of the correct eligibility criteria under
Section 301 and do not flag a claim as potentially eligible. In other cases, after a disability appeal
is lost, SSA does not follow up on potential Section 301 eligibility to reduce overpayments
caused by benefit continuation. Misunderstandings about Section 301 have a direct negative
impact on youth, and we recommend that SSA conduct additional trainings with its staff to clarify
correct policies and procedures. We also recommend that SSA develop external training on
Section 301 to share with the Department of Education, VR agencies, and other service providers
to help them inform youth of their right to continuing benefits under this policy.

Opportunities for Ohioans with Disabilities
OOD also recommends increased communication to parents/guardians to prepare for the age 18 re-
determination, including information about Section 301, continued payments to individuals participating
in vocational rehabilitation services.